

L.A. County Seniors Count!



Survey of the Older Adult Population
Community and Senior Services • County of Los Angeles

Table of Contents

Executive Summary	2
Key Findings	6
Introduction	8
Methods	11
Searches	12
Areas of Need in Los Angeles County Seniors	14
Respondent Characteristics	14
A Closer Look at the Needs of Los Angeles County's Older Adults	17
Health	17
Productive Activity	20
Information and Assistance.....	23
Daily Activities	26
Housing	27
Transportation	29
Caregiving	31
Conclusions	32
Needs by Age: Mitigating Problems, Delaying Risk.....	34
Needs by Ethnicity and Race	35
Needs by Geography	35
Policy Implications for the Future	36
References	37
Appendix A. Acknowledgements	38
Appendix B. Detailed Study Methods	40
The Needs Assessment Committee and History of the Project	40
Instrument Development and Kick-off.....	41
Survey Administration.....	41
Data Analysis and Reporting.....	42
Data Entry and Analysis	42
Data Weighting	42
National Search for Senior Needs Assessment Survey Reports	43
Description of the Coverage	44
Data Analysis	44
Literature Review of Gerontological Studies	45
Appendix C. Crosstabulation of Results	46

Appendix D. Maps	55
City of Los Angeles Council Districts Map.....	55
County of Los Angeles Supervisorial Districts Map.....	56
County of Los Angeles Supervisorial Sub-Districts Map	57
County of Los Angeles Service Planning Areas (SPAs) Map	58

Appendix E. Survey Instrument	59
--	----

Appendix F. Weighted Tables	63
--	----

Appendix G. Bibliography	78
---------------------------------------	----

Index of Figures

Figure 1: Los Angeles County Senior Needs Assessment Components.....	11
Figure 2: Senior Needs Included in Assessment	16
Figure 3: Barriers to Productive Activities	23
Figure 4: Perception of Public Transportation.....	30

Index of Tables

Table 1: Health Needs in Los Angeles County	18
Table 2: Productive Activity Needs in Los Angeles County	20
Table 3: Information and Assistance Needs in Los Angeles County.....	24
Table 4: Daily Activity Needs in Los Angeles County	26
Table 5: Housing Needs in Los Angeles County	28
Table 6: Transportation Needs in Los Angeles County.....	29
Table 7: Interest in Transportation Classes	30
Table 8: Health Needs by Age, Sex and Race.....	46
Table 9: Health Needs by Council District	46
Table 10: Health Needs by Supervisorial District	46
Table 11: Health Needs by Supervisorial Sub-District.....	47
Table 12: Health Needs by Service Planning Area	47
Table 13: Productive Activity Needs by Age, Sex and Race	47
Table 14: Productive Activity Needs by Council District.....	48
Table 15: Productive Activity Needs by Supervisorial District.....	48
Table 16: Productive Activity Needs by Supervisorial Sub-District.....	48
Table 17: Productive Activity Needs by Service Planning Area	49
Table 18: Information and Assistance Needs by Age, Sex and Race.....	49
Table 19: Information and Assistance Needs by Council District	49
Table 20: Information and Assistance Needs by Supervisorial District	49
Table 21: Information and Assistance Needs by Supervisorial Sub-District	50
Table 22: Information and Assistance Needs by Service Planning Area.....	50
Table 23: Daily Activities Needs by Age, Sex and Race	50
Table 24: Daily Activities Needs by Council District.....	50
Table 25: Daily Activities Needs by Supervisorial District.....	51
Table 26: Daily Activities Needs by Supervisorial Sub-District.....	51
Table 27: Daily Activities by Service Planning Area	51
Table 28: Housing Needs by Age, Sex and Race	51
Table 29: Housing Needs by Council District.....	52
Table 30: Housing Needs by Supervisorial District.....	52
Table 31: Housing Needs by Supervisorial Sub-District.....	52
Table 32: Housing Needs by Service Planning Area	53
Table 33: Transportation Needs by Age, Sex and Race.....	53
Table 34: Transportation Needs by Council District	53
Table 35: Transportation Needs by Supervisorial District	53
Table 36: Transportation Needs by Supervisorial Sub-District.....	53
Table 37: Transportation Needs by Service Planning Area	54
Table 38: Caregiving Needs by Age, Sex and Race	54
Table 39: Caregiving Needs by Council District.....	54
Table 40: Caregiving Needs by Supervisorial District.....	54
Table 41: Caregiving Needs by Supervisorial Sub-District.....	54
Table 42: Caregiving Needs by Service Planning Area	54

Executive Summary

Fast-forward to 2030. Imagine a Los Angeles County with almost three million residents over age 60, up from 1.4 million today. One in every four neighbors will be older. What will be their quality of life? What services must we as a society provide now to assist and support them? As Los Angeles County's population ages, pressure builds to assure the right local services exist to preserve older residents' healthy independence and to mitigate potential problems as they age. Los Angeles County is huge even by the standards of most countries, so even the problems of a small percent of its multimillion senior population can tower above a landscape of community issues the county faces. The senior population has many deep roots throughout the county. These roots help anchor the traditions of the unique features of the region.

The clock ticks. We need to understand the needs of Los Angeles County's aging population and address them now. We must engage the people receiving those services. Our conclusions about service delivery will not be valid without this step.

The County of Los Angeles Community and Senior Services, the City of Los Angeles Department of Aging and Los Angeles County Commission on Aging (LACCOA) collaborated to conduct a large-scale needs assessment of older residents in Los Angeles County. Our undertaking included:

- **A survey completed by over 16,500 seniors in Los Angeles County**
- **National search for senior needs assessment survey reports**
- **A literature review of gerontological studies**

We found needs in seven categories: Health, Productive Activity, Information and Assistance, Daily Activities, Housing, Transportation and Caregiving.



Health emerged as the greatest area of need in this assessment. Many Los Angeles County seniors lacked adequate health and dental insurance. They did not use preventive health services. Many were interested in physical exercise and wellness information. Information and assistance needs were also evident for many seniors struggling with legal information and benefits. Opportunities for productive activity were also found to be a significant need in the county. Increased opportunities for recreation and entertainment, physical exercise, volunteerism and employment were attractive to a sizable number of Los Angeles County seniors. Needs were also expressed in the areas of daily activities, housing, transportation and caregiving—yet were found to affect smaller numbers of the older adult population.

This report made clear that it is misleading to talk too broadly about the needs of older adults in Los Angeles County. Residents with different backgrounds (e.g., age, race, sex) and in different geographical parts of Los Angeles County reported different needs. In general, Los Angeles County's residents age 60–74 expressed needs in preventive categories. In the general area of health, they wanted affordable health insurance, health information, preventive services, physical exercise, and, to a lesser extent, prescription drug affordability. In productive activity, younger seniors sought employment, recreation and leisure, and civic activity. They requested information and assistance in legal, public benefits and safety issues. They wanted more support with caregiving burdens and housing affordability. Younger seniors' needs in these areas significantly outweighed the needs expressed by older seniors in this survey.

The oldest of seniors reported needs most often related to social isolation, help needed with daily activities, and home maintenance. These needs, although affecting a smaller number of older residents, have more serious impact on overall quality of life.

Besides different needs reported by older adults of different ages, there were some differences in geographic regions within Los Angeles County and between different racial-ethnic groups. There was no distinct pattern of need among any one subpopulation; however, ethnic groups expressed higher rates of need than did Caucasian groups. Native Americans, Pacific Islanders, Asians and residents of multiple ethnicities in Los Angeles County reported more health needs, needs for employment, concerns about social isolation, caregiving, housing or transportation needs. Among those reporting the most need, Hispanic/Latino residents said that daily activities were issues.

No one geographic area stands out as having the most problems in every category, but some of the 15 City of Los Angeles Council Districts need more attention in certain areas than others. In Council District 1, residents reported affordable health services and health information, employment and social isolation, daily activities, housing and transportation needs. In Council District 9, older adult residents' responses showed concerns about health insurance, prevention services and medication management, employment and social isolation, information needs about Social Security, Medi-Cal or IHSS (in-home supportive services) benefits, daily activities, caregiving and transportation.

The needs in all five County of Los Angeles Supervisorial Districts were not evenly distributed nor excessively concentrated; however, in many of the areas of concern, residents of Supervisorial Districts 1 or 2 reported most need, with two exceptions; residents of Supervisorial District 3 showed the greatest overall need for productive activity and interest in recreation, while residents of Supervisorial District 4 reported proportionately more interest in community involvement.

Results of the survey provide policy makers and service providers a resource for productive county engagement, planning and decision-making. Unless we take action now, looking backward from 2030, the needs identified in this report may look trivial because of the vast growth in the number of older adults in the next two decades. It is difficult to predict how American communities will handle the coming numbers of older adults, but we can be certain that dramatic changes lie ahead. With the findings contained in this report, the County of Los Angeles can help to direct the future of the region rather than simply react when challenges become unmanageable. The County of Los Angeles can ensure that older residents will enjoy a high quality of life for years to come.

Key Findings

Senior respondents reported the following:

61%

had inadequate or lacked
dental insurance

54%

were interested in
physical exercise

47%

lacked **prescription
drug insurance**

33%

were interested in
health promotion or
disease prevention

18%

lacked affordable
dental care

22%

lacked information
about opportunities for
productive activities

31%

had not had a **dental
exam** in the last 3 years

13%

reported wanting a **job**

51%

had not had a
pneumonia shot

24%

reported interest
in **volunteering
& community
involvement**

33%

had not had a **flu shot**

29%

reported **social isolation** & desire for **interaction**

35%

wanted **safety information** or had **safety issues**

18%

had concerns about **Social Security benefits**

25%

had concerns about **identity theft**

20%

had concerns about or needed a **will or trust**

25%

needed help with **routine housework**

27%

needed help with **meal preparation**

19%

needed help with **grocery shopping**

25%

needed help with **home repairs**

19%

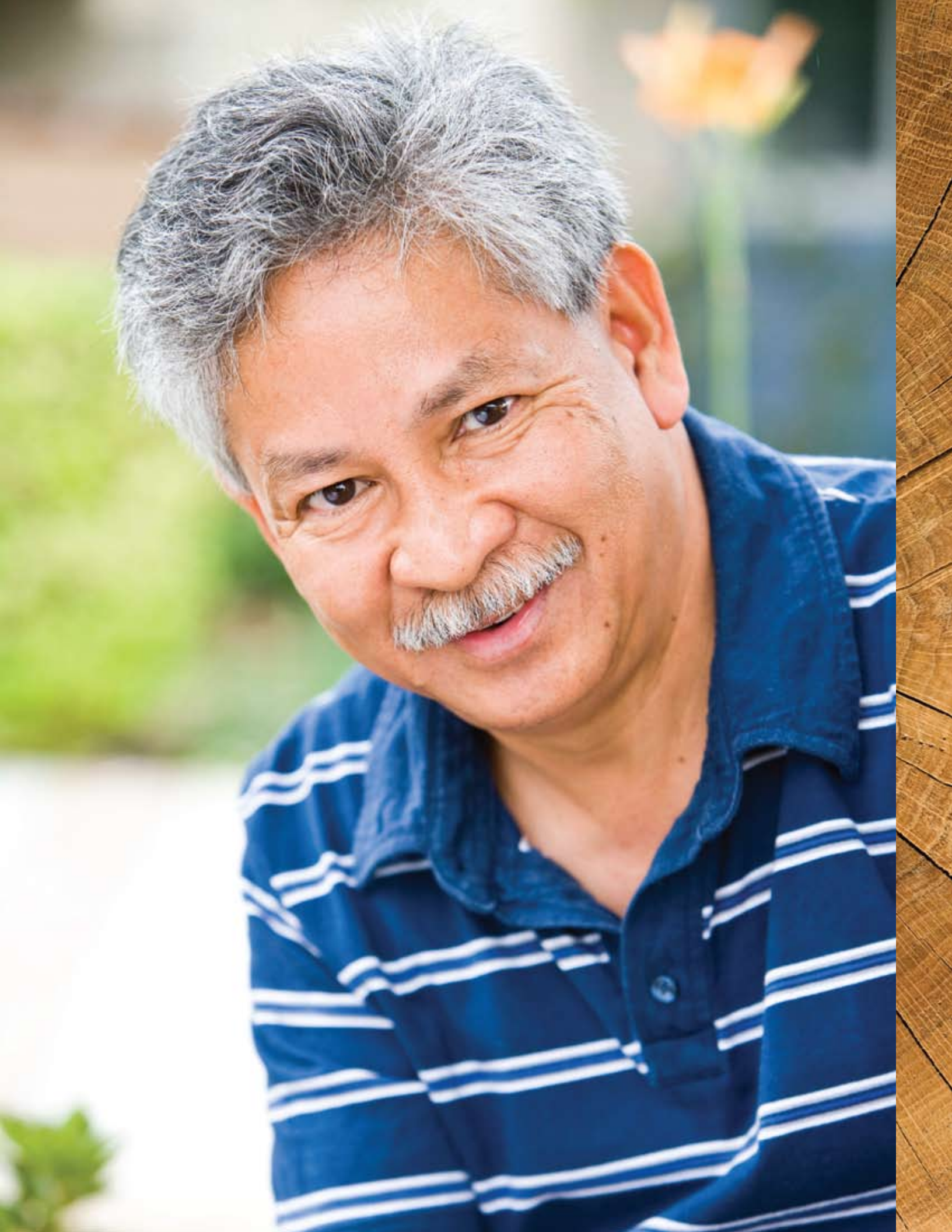
lacked **transportation** for medical appointments

Introduction

Los Angeles County consists of 88 cities and, with unincorporated land, encompasses over 4,000 square miles. The county is governed by a five-member Board of Supervisors. Each member represents a distinct geographic district. With more than ten million residents, 15% of whom are age 60 or older, Los Angeles County's population exceeds that of 43 states.

Fast-forward to 2030. Imagine a Los Angeles County with almost three million residents over age 60, up from 1.4 million today. One in every four neighbors will be older. What will be their quality of life? What services must we as a society provide now to assist and support them? As Los Angeles County's population ages, pressure builds to assure the right local services exist to preserve older residents' healthy independence and to mitigate potential problems as they age. Los Angeles County is huge even by the standards of most countries, so even the problems of a small percent of its multimillion senior population can tower above a landscape of community issues the county faces. The senior population has many deep roots throughout the county. These roots help anchor the traditions of the unique features of the region.

One-third of all Americans will reach age 50 by 2010 and the U.S. population age 65 and over will double within the next 25 years (National Institute on Aging, 2006). Aging not only occurs to nations and individuals, it happens to communities. The health of America's older adults will affect community resources greatly. The Older Americans Act (OAA) currently supports a national aging services network that provides home and community-based services to over 8,000,000 older adults. Case management services provided by the network include congregate meals, home-delivered meals, nutrition education, transportation, adult day care, health promotion and the support of caregivers (Older Americans Act of 1965). Our country's already strained social services, including suitable housing (Commission on Affordable Housing and Health Facility Needs for Seniors in the 21st Century, 2002) and transportation (Bailey, 2004) will make it even more difficult to keep all older adults well and independent. More must be done and done by all levels of government, private non-profit agencies, and seniors themselves. The current model of service to seniors, built mainly on the policies and funding of the federal government, is not sustainable.



To plan better for the upcoming needs of seniors, the County of Los Angeles Community and Senior Services, the City of Los Angeles Department of Aging and the Los Angeles County Commission on Aging (LACCOA) collaborated on a large-scale needs assessment of older residents. The study provided an understanding of the strengths and needs of older adults as reported by Los Angeles County's older adults themselves. We hope this report enables local government, community-based organizations, the private sector and other county residents to understand senior needs more accurately. We also hope it helps plan the services and resources needed to serve increasing numbers of seniors. With information on the needs of its older residents, Los Angeles County can shape public policy, educate the public and help communities and organizations maintain a high quality of life for older adults. The specific objectives of the project were to:

- **Provide an understanding of the needs of seniors living in the County of Los Angeles**
- **Plan future programs administered by the City and County of Los Angeles**
- **Lend more objectivity to plan health and human services needs for seniors**
- **Produce survey results to influence public policy on issues affecting seniors on a nationwide scale**

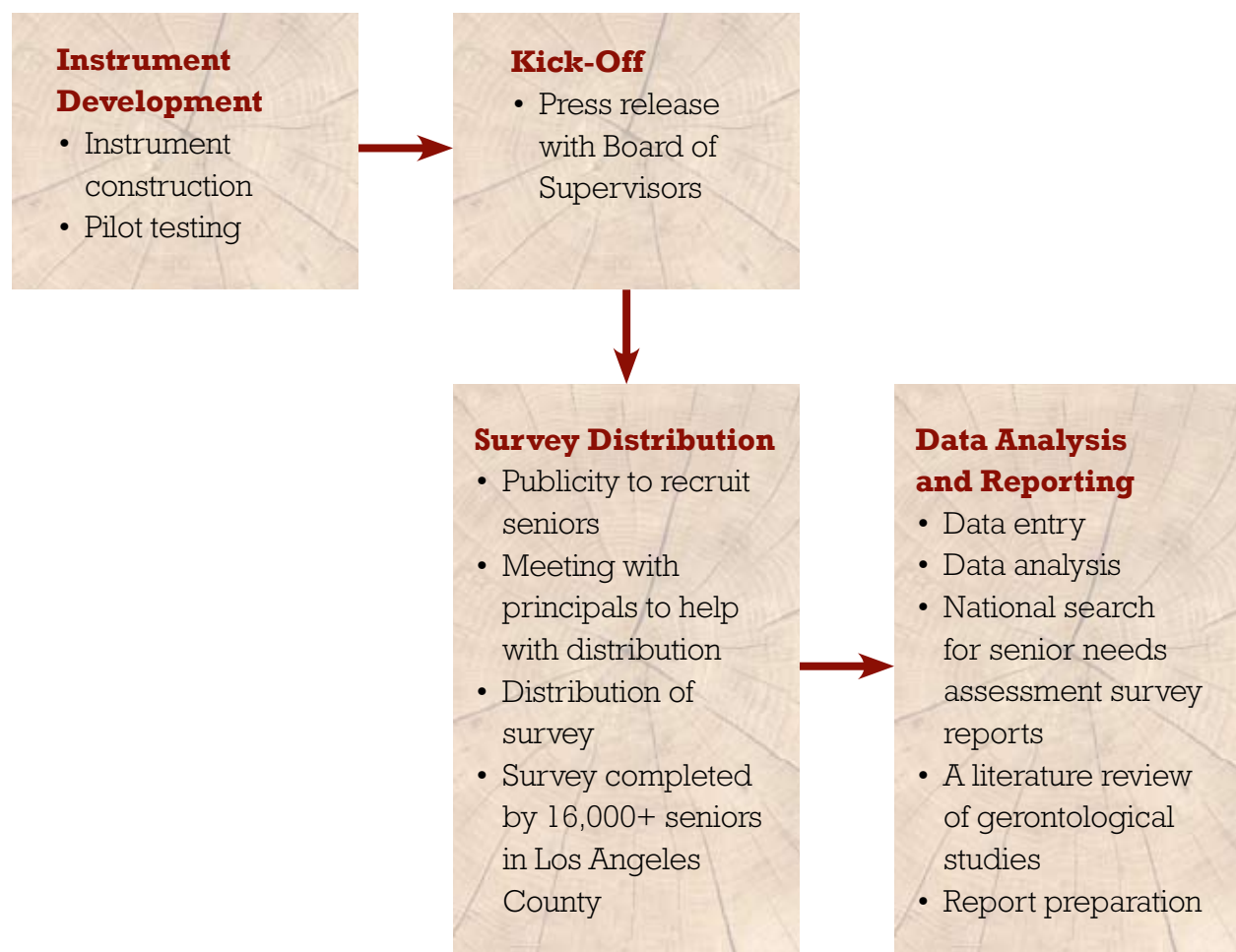


Methods

“L.A. County Seniors Count!” was developed by the County of Los Angeles Community and Senior Services, the City of Los Angeles Department of Aging and members of a Needs Assessment Committee of LACCOA. The Needs Assessment Committee determined the methods and sampling plan, developed the survey questionnaire, recruited partners for distribution, managed the data collection and supervised consultants’ data entry, data analysis and reporting.

We gave the four-page survey instrument to seniors age 60 and over. It contained 40 questions on daily living, health care, housing, transportation, caregiving, demographics and more. The survey process is detailed below:

Figure 1: Los Angeles County Senior Needs Assessment Components



About 100,000 surveys were given out at senior centers, nutrition sites, In-Home Supportive Services (IHSS) clients, home delivered meals routes, community centers, libraries, churches and synagogues, election polling places, the Los Angeles County Fair, and other locations serving seniors. Seniors completed 16,500 questionnaires as part of the study (16.5% response rate)—the largest number of completed needs assessment surveys found in the U.S. for a study of this type.

We administered the survey by paper and online. The printed survey was available in seven languages including English, Spanish, Chinese, Tagalog, Korean, Armenian and Japanese. (For more information on detailed study methods, see Appendix B. Detailed Study Methods, page 40.)

Vendors provided data entry, data analysis and a draft report of study results. Members of the Needs Assessment Committee and an expert panel of academic gerontologists edited the Final Report. We weighted the data to reflect the demographics of the senior population in Los Angeles County.

Searches

We included two literature searches to provide context to the survey assessment results:

1) National search for senior needs assessment survey reports

2) A literature review of gerontological studies

A vendor conducted both of these literature searches. For the first search, we used the Internet and communications by telephone, mail and e-mail to collect survey reports from Area Agencies on Aging (AAAs), state departments of aging, other planning and advocacy organizations (such as AARP) and local governments (cities and counties). More than 200 senior needs assessments were identified and reviewed.

The second search consisted of a Web-based literature review covering 15 content areas. The search focused on research and reports that were 1) produced primarily in the last five years and 2) relevant to older adults across the United States.



Areas of Need in Los Angeles County Seniors

Respondent Characteristics

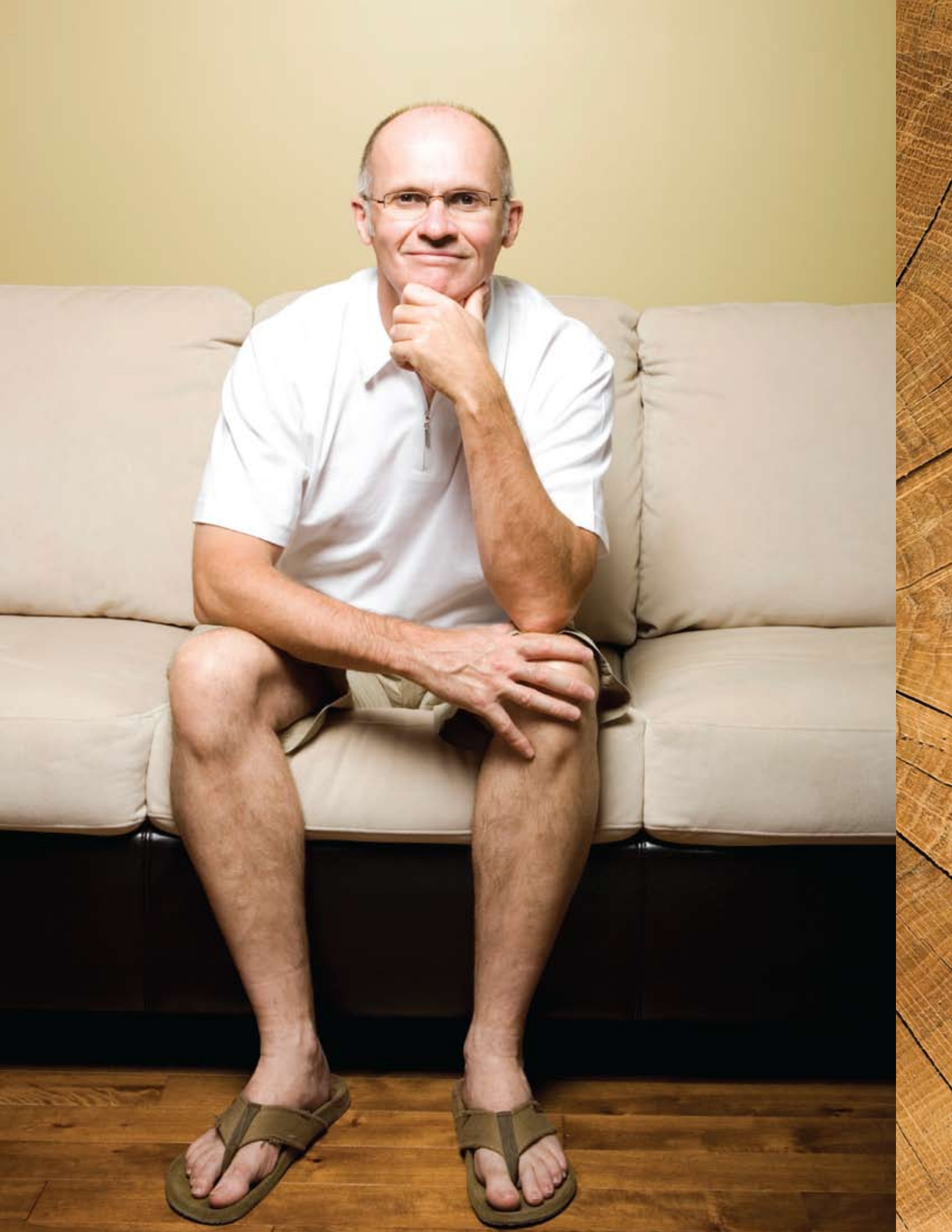
The majority of survey respondents were between the ages of 60 and 74 (65%) and female (57%). More than half of respondents were white (54%) and almost one-quarter of respondents were Hispanic or Latino. African American and Asian Americans responded to the survey in similar percentages. One-quarter of respondents reported having a high school diploma, and one-third reported having a college degree. About two-thirds of respondents reported having lived in Los Angeles County for 20 years or more with an average length of residency of 32 years.

The City of Los Angeles is divided into 15 Council Districts (see map, page 55). The County of Los Angeles is divided into five Supervisorial Districts (see map, page 56). Supervisorial Sub-Districts are divided into Supervisorial District field offices (see map, page 57).

Needs were grouped into the following categories: health, productive activity, information and assistance, daily activities, housing, transportation and caregiving. Four overlapping geographic areas were defined for use in comparisons: Council Districts, Supervisorial Districts, Supervisorial Sub-Districts and Service Planning Areas (SPAs, see map, page 58). Supervisorial districts (including the sub-district categories) and SPA definition are for the entire county, while Council Districts are within the City of Los Angeles only.

Representation of the County's Supervisorial Districts by the respondents ranged from a low of 16% in Supervisorial District 1 to a high of 23% in Supervisorial District 5. Among the Council Districts of the City of Los Angeles, Districts 1, 6, 9 and 13 each had less than 5% of respondents within their boundaries, while Districts 14 and 15 each had about 10% of respondents.

Questionnaires distributed throughout L.A. County captured a range of needs from many older adults already using services through senior centers, nutrition sites, home delivered meals routes, and other points of entry. The needs of Los Angeles County's older adults are provided with an approximation of the percentage of respondents with the need. The percentage of Los Angeles's older adults estimated to have a given need in 2007 are only as accurate as the sample is representative of the greater Los Angeles County



older adult population. It is known that survey participants may not fully represent seniors in Los Angeles County. The survey data were statistically weighted to ensure that results were based on a demographic profile of older adults (by gender, age category and race/ethnicity groupings) that echoed the demographics of older adults who live in Los Angeles County, according to the county's demographic estimates. Needs were grouped into the following categories:

Figure 2: Senior Needs Included in Assessment*



* The needs measured in the survey are reported in the tan circles. Research shows that satisfaction of those needs leads to the outcomes listed in the center.

A Closer Look at the Needs of Los Angeles County's Older Adults

Health, Productive Activity, Information and Assistance, Daily Activities, Housing, Transportation and Caregiving needs are described below.

HEALTH

The Los Angeles County survey focused on a variety of health issues affecting older adults. Nearly all of the survey respondents were found to have a need in at least one health-related area. Specifically:

- **Respondents reported not having complete health insurance—the biggest issues were in the areas of dental insurance (61%) and prescription drug coverage (47%)**
- **The use of routine preventive health services showed that one-half (51%) of the seniors surveyed had not received a pneumonia shot and one-third (33%) reported not getting a flu shot. One-third (31%) of survey respondents had not had a dental exam in the three years prior to the survey**
- **Interest in physical exercise was found in more than one-half (54%) of survey respondents, and one-third (33%) expressed an interest in receiving information about health promotion and disease prevention**
- **Among specific areas of health care, dental care was most often identified as unaffordable (18%)**
- **Most seniors surveyed were able to manage their medications**

Table 1: Health Needs in Los Angeles County

	Percent of respondents with need
Insurance	
Does not have medical insurance or HMO	14%
Does not have dental insurance	61%
Does not have prescription drug insurance	47%
Affordability	
Needs, but is not able to afford medical care	9%
Needs, but is not able to afford dental care	18%
Needs, but is not able to afford prescription drugs	9%
Needs, but is not able to afford vision care (glasses, cataract surgery)	13%
Needs, but is not able to afford hearing care (hearing aids, implants)	11%
Prevention services	
Has not had a dental exam in last three years	31%
Has not had a flu shot in the last year	33%
Has not had a pneumonia shot in the last ten years	51%
Has not had a physical exam in the last three years	22%
Physical exercise	
Interested in physical exercise	54%
Medication management	
Has problems with paying for prescription medications	14%
Has problems with refilling prescription medications	6%
Has problems with understanding doctor's prescription medication orders	5%
Has problems taking pills on time	8%
Health information	
Would like information about health promotion and disease prevention activities (nutrition counseling, medication management)	33%

The health-related needs of County residents in different geographic areas and those with different demographic composition were compared. Except in a few instances, the dominance of health needs overall and for each of the health need components—insurance (especially the need for dental insurance), affordability, prevention services (especially the absence of a pneumonia vaccination), physical exercise, medication management and health information—was not particularly different for men or women, members of different racial groups or younger and older residents over age 60. The need for prevention services, affordable health care, physical exercise opportunities and health information was expressed somewhat more often by Los Angeles County's youngest residents over 60 (those age 60–74) than its oldest residents (those age 85 and older).

The health needs expressed by seniors were similar throughout the City of Los Angeles. Residents in Council District 9 reported having a need for insurance, prevention services and medication management more often than did residents in other council districts. For affordability and health information, residents of the City of Los Angeles Council District 1 expressed the most need. Physical exercise was indicated as the highest concern for residents in Council Districts 3 and 11. For the County of Los Angeles, in Supervisorial Districts 1 and 2 residents reported a higher percent need in many but not all health need categories compared to needs reported by residents in other Supervisorial Districts. Residents in the County of Los Angeles Supervisorial Sub-District 2-5, compared to residents in the other Supervisorial Sub-Districts, expressed needs in greatest percentages for physical exercise, medication management assistance and health information. Residents in Supervisorial Sub-District 2-0 expressed the greatest need for preventive health services.

61%
of senior
respondents
had inadequate
or lacked
**dental
insurance**

Another way that L.A. County divides its health and human services geographic area is by Service Planning Areas. County departments use SPAs for service coordination and collaboration. Health needs were more commonly reported in five of the eight SPAs. Affordable health care and health information needs prevailed in SPA 4; residents of SPA 5 expressed the greatest need for physical exercise; SPA 6 residents reported most often the need for preventive health services; health insurance needs were most often identified by SPA 7 residents and residents of SPA 8 more than residents in other SPAs indicated that medication management was a problem.

PRODUCTIVE ACTIVITY

The “L.A. County Seniors Count!” survey gauged resident interest in the areas of employment, civic activity, and recreation and leisure.

Table 2: Productive Activity Needs in Los Angeles County

Percent of respondents with interest/need	
Recreation and leisure	
Interested in recreation	47%
Interested in entertainment	42%
Interested in religious activities	25%
Interested in educational activities	36%
Civic engagement	
Interested in volunteering	24%
Interested in community involvement	24%
Social activity	
Has minor or serious problem with isolation	29%
Employment	
Would like to find a job	13%
Interested in employment/job training/job placement	10%

Recreation and Leisure

A large proportion of Los Angeles County seniors expressed interest in recreation, education, entertainment and religious activities. Recreation and entertainment were the most preferred activities with approximately one-half of respondents expressing interest. Thirty-six percent of respondents said they were interested in educational activities, and 25% in religious activities.

Civic Engagement

Volunteering, participating in religious or political groups or being active in community decision-making, has intrinsic value. It provides benefit to communities and seniors. Studies indicate that volunteering in later life associates with better overall physical and mental health. (Butricia & Schaner, 2005; Namkee et al., 2007)

The literature on older adult civic activities finds that seniors are well engaged in electoral participation (i.e., voting) but less engaged in volunteering and community service (Adler et al., 2005). Approximately one-quarter of the seniors surveyed in Los Angeles County reported that they were interested in volunteering. About the same amount (24%) reported interest in community involvement.

Social Activity

The connection of social support to morbidity and mortality is well-documented in research. Higher levels of social engagement are associated with decreased levels of heart attacks, lower cancer occurrences and lower risks for a number of co-morbidities—upper respiratory illness, depression and cognitive decline—to name a few (Cohen & Lemay, in press). Social support also has been found to help individuals make healthy behavioral changes (Cohen & Lemay, in press). Almost one-third (29%) of the older residents surveyed reported isolation as problematic and the desire for more social activity.

22%
of senior
respondents
lacked
information about
opportunities
for **productive
activities**

Employment

People in the U.S. are working longer and retiring at an older age than they did 20 years ago. Of all developed countries, the U.S. has the highest labor force participation of adults age 65 and older. Older adults are postponing retirement for a variety of reasons: improved health, to benefit from delayed pension plans, to accumulate additional wealth, and because the knowledge worker economy is less physically demanding than jobs in the economy of 20 years ago. Some experts believe that older workers will become an untapped resource for economic stability when Boomers begin retiring. Thirteen percent of Los Angeles County survey respondents reported that they were interested in finding a job. About 10% were interested in activities related to employment, job training or job placement.

Productive Activity Need by Population Sub-group and Geography

Overall, the need for productive activity was similar throughout the County. Interests in productive activity (including social activity) of residents did not vary by age, sex or race, and geographic areas were compared to identify groups with greater need. The youngest category of older adults (those age 60–74) expressed the greatest interest in productive activity, including employment, recreation/leisure and civic engagement. The oldest seniors (those 85 and over) had the greatest concern about isolation as did multi-ethnic residents. Native Americans, although a small segment in Los Angeles County,

expressed the greatest interest in productive activity including employment. They were also interested in recreation/leisure and civic activities. More men expressed interest in job opportunities than women.

Within the City of Los Angeles, interest in productive activity, overall, was most widespread in Council Districts 3 and 11. The rate of concern about employment was important in Council Districts 1, 6, 9, 10 and 13; in Council Districts 1 and 9 more residents were concerned about social isolation (named “social activity” in this report). Recreation and leisure was the prime concern of residents in Council Districts 3, 12; and civic engagement was paramount to residents in Council Districts 2, 3, 4, 5, 10, 11 and 12.

Respondents living in County of Los Angeles Supervisorial District 3 expressed interest in productive activity, especially recreation and leisure, somewhat more often than residents in other districts. Just as with health needs, residents of Supervisorial Sub-District 2-5 expressed the most concern about productive activity than other residents in Supervisorial District 2. Residents in Supervisorial Sub-District 2-5 also showed relatively greater concerns about social isolation and recreation/leisure compared to residents in other Supervisorial Sub-Districts. Employment was the greatest concern among residents in Supervisorial Sub-District 2-0. Civic activity was an especially prevalent concern for residents of Supervisorial Sub-District 4-3.

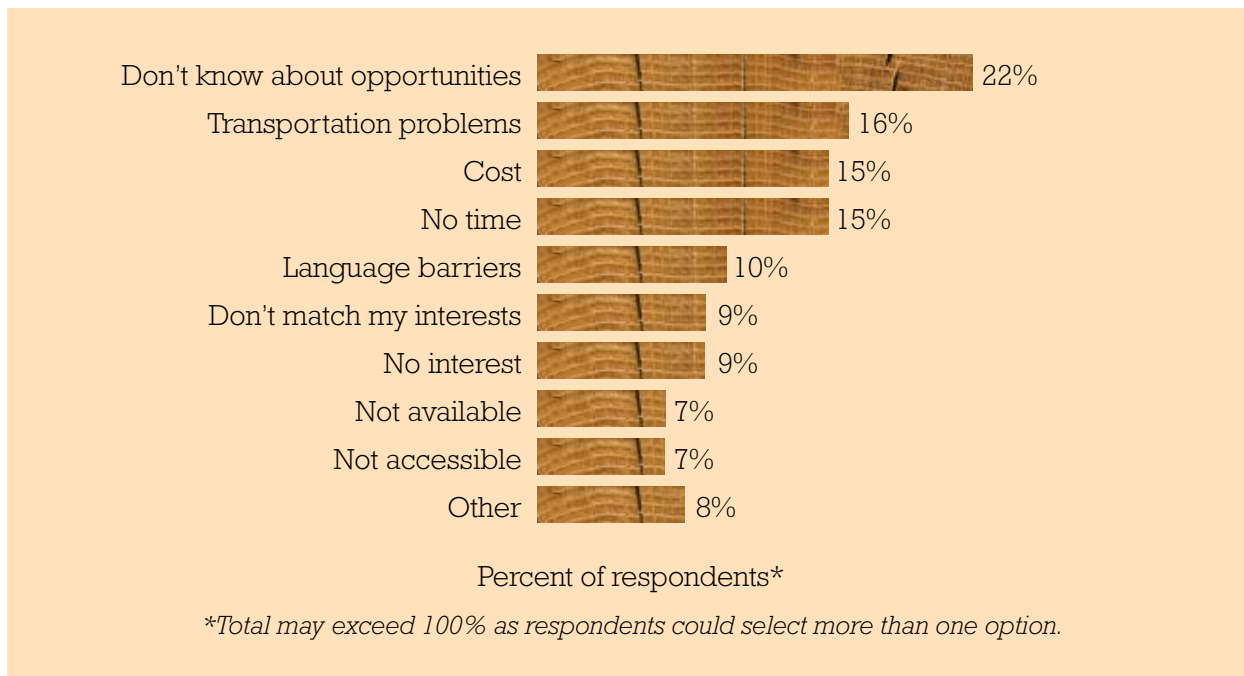
Residents of SPAs 4 and 5 expressed great need of productive activities, including recreation, leisure and civic opportunities. SPA 4 expressed strong desire for employment and was very concerned about social isolation.



Barriers to Productive Activity for Seniors in Los Angeles County

A specific question in the survey assessed the issues that kept seniors from “doing the things they like in the community.” Nine barriers were listed along with an “other” category. The most common reason given as a barrier was “don’t know about opportunities,” followed by “transportation problems.”

Figure 3: Barriers to Productive Activities



INFORMATION AND ASSISTANCE

A community can have a plentiful array of services for seniors, but if seniors don’t know the services exist, they can’t take advantage of them. With hundreds of sources of information about legal and benefit issues, many older adults are not sure where to start. 20% had concerns about or needed a will or trust. 18% percent had concerns about social security benefits.

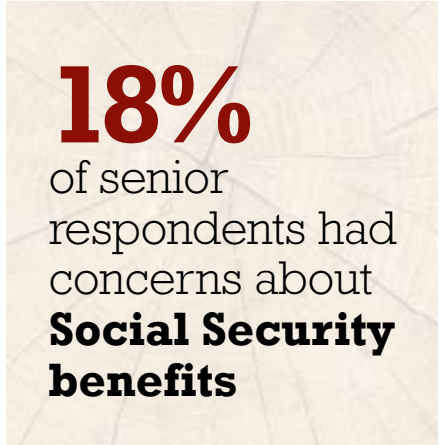
In terms of safety, the main issues faced by older adults at the national level are identity theft and elder abuse including various forms of domestic abuse (Brandl & Cook-Daniels, 2002; National Center on Elder Abuse, 2005; Walters & Jackson, 2003). Among adults age 50 years and older, about 1 in every 5 are victims of identity theft such as credit card fraud and bank fraud. California is one of the states with a high rate of identity theft for persons age 50 and older and 1 in 4 older adults (25%) reported concerns about identity theft (Walters & Jackson, 2003). Elder abuse is believed to be widely unrecognized and goes underreported but appears to be most common with the older old, persons age 80 and older (National Center on Elder Abuse, 2005). As many as 35% of the Los Angeles seniors surveyed expressed concerns about crime and safety or requested information about safety issues.

Table 3: Information and Assistance Needs in Los Angeles County

	Percent of respondents with need
Legal information and assistance	
Has concerns about/needs a will/trust	20%
Has concerns about financial debt	12%
Seeks assistance from legal aid	6%
Seeks assistance from a private attorney/paralegal	14%
Seeks assistance from small claims court	2%
Benefit information and assistance	
Has concerns about Social Security benefits	18%
Has concerns about Medi-Cal benefits	16%
Seeks assistance from Social Security	17%
Seeks assistance from Medi-Cal	11%
Needs help with applying for in-home supportive services (IHSS)	10%
Needs help with appealing denial of IHSS	2%
Safety information and assistance	
Has concerns about property crime	12%
Has concerns about identity theft	25%
Has concerns about physical crime	12%
Would like information about elder abuse intervention and prevention	14%
Would like information about safety education and prevention (home safety, fall prevention, fire prevention, fire safety, crime stop)	35%

Among information and assistance categories, the youngest residents over age 60 (60–74) expressed need in the greatest numbers. Seniors with Asian or Pacific Islander backgrounds indicated they had the greatest need in overall information and assistance—in particular, for benefit information and assistance. For legal information and assistance and safety information, Native Americans or Alaskan Natives expressed the most concern.

There were differences in information and assistance needs among residents living in L.A. City's Council Districts 9, 10 and 13 (Table 19, page 49). In Council District 9, benefits assistance was more pronounced, and for Council District 10, safety and information assistance showed the greatest need. In Council Districts 8 and 11, residents' concerns about legal information were more pronounced compared to residents in other Council Districts. Council District 8 had chief concerns about safety.



18%
of senior
respondents had
concerns about
**Social Security
benefits**

In L.A. County, overall information and assistance needs were similar across the five Supervisorial Districts and that similarity held for legal assistance needs, too. Two exceptions were benefit assistance and safety information and assistance which stood out as especially salient needs for residents in Supervisorial Districts 1 and 2, respectively.

Diverse needs emerged for residents living within Supervisorial Sub-Districts. Overall, residents of Supervisorial Sub-District 2-5 most often expressed needs, in general. Specifically, information needs were greatest for residents of Supervisorial Sub-Districts 2-5, 1-2, 2-0 and 5-4. An extraordinarily large percent of residents of Supervisorial Sub-District 2-5 expressed needs in each of the categories of information and assistance. Legal information was a relatively greater need for residents in 5-3. Benefit information and assistance stood out as a need for residents of Supervisorial Sub-District 1-2 and 2-0, and in 1-2 residents expressed more need for safety information and assistance.

SPA 4 and 6 residents reported more overall need for information and assistance and benefit assistance than did residents of other SPAs, with the greatest need for legal assistance in SPA 6.

DAILY ACTIVITIES

Work, homemaking, leisure and activities of daily living (ADLs) are the things we normally do in daily living including any activities we perform for self-care (such as feeding, bathing, dressing and grooming). Instrumental activities of daily living (IADLs) are not necessarily for fundamental functioning, but allow people to live independently within their community. They include light housework, preparing meals, taking medications, shopping for groceries or clothes, using the telephone, and managing money. Older adults report more restrictions on daily activities than do younger adults. Nationally, about 1 in 5 older adults living at home reports at least one daily activity restriction (Johnson & Wiener, 2006). At least half of all respondents (51%) reported difficulty with daily activities.

Difficulty walking was the most prevalent problem with about 13% reporting they were unable to perform the task or had serious difficulty performing it. Difficulty with dressing and bathing affected 1 in 10 survey respondents.

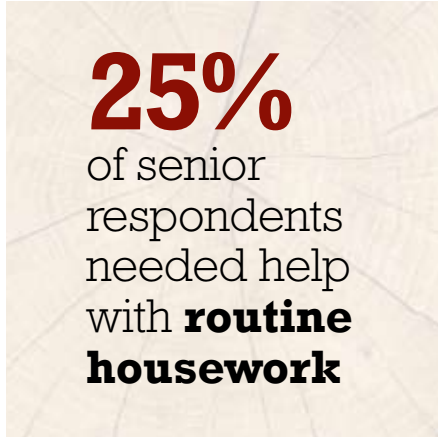
Housework and yard work were the activities where the highest percent (25%) of survey respondents reported need. Help with meals, grocery shopping and laundry needs were expressed by about 20% of the seniors surveyed.

Table 4: Daily Activity Needs in Los Angeles County

	Percent of respondents with need
Cannot or has serious difficulty getting in or out of bed	7%
Cannot or has serious difficulty eating	3%
Needs help dressing/bathing	10%
Needs help walking	13%
Needs help transferring from bed to wheelchair	3%
Cannot or has serious difficulty preparing meals or needs help cooking	20%
Cannot or has serious difficulty using the telephone	5%
Needs help picking up medication	14%
Needs help bill paying/budgeting	13%
Has problems with yard work or needs help with yard work	24%
Needs help with routine housework	25%
Needs help with laundry	17%
Needs help with grocery shopping	19%
Needs home-delivered meals (receives meals, needs meals but does not receive them or receives meals but needs help with heating them)	17%

Daily living needs were compared for residents who differed by age, sex and race and among those living in different Council or Supervisorial Districts. As would be expected, the oldest residents of Los Angeles County reported the most difficulty with basic activities. Latino older adults reported difficulties with daily living in proportions higher than those reported by other ethnic groups. In L.A. City, it was the residents of Council District 9 with greatest need. The difficulties with daily activities expressed by residents in Council District 9 were followed in prevalence by the needs of residents in Council District 8.

The residents of County Supervisorial District 1 reported more problems than residents in other Supervisorial Districts with daily activities and once again, residents of Supervisorial Sub-District 2-5 reported the greatest needs, followed by residents in Supervisorial Sub-District 2-0. Residents of SPA 6 expressed the greatest need for help with daily activities.



25%
of senior
respondents
needed help
with **routine**
housework

HOUSING

Housing costs in Los Angeles have risen sharply in recent years. Due to this economic downturn and general cost of living increases, seniors are the most vulnerable as they move into their retirement years with the hopes of using this important property asset to finance their golden years. Unfortunately this plan does not always work out. The needs assessment survey analyzed how seniors were affected by energy/utility costs where they were living, and what specific housing challenges they encounter. 1 in 10 seniors (10%) reported having trouble paying rent. For Los Angeles County's seniors, the issues of housing affordability and the need for home maintenance services were prevalent. 25% of respondents reported needing help with minor home repairs. 10% had problems finding an apartment and 10% had problems paying rent.

Table 5: Housing Needs in Los Angeles County

Percent of respondents with need	
Affordability	
Has problems meeting mortgage/insurance/maintenance payments	7%
Has problems meeting condominium fee payments	2%
Has problems finding an affordable apartment	10%
Has problems paying rent	10%
Safety	
Has problems with sufficient lighting	3%
Has problems with safety issues	5%
Home maintenance	
Needs help with minor home repairs	25%
Has problems with major homeowner repairs (plumbing/electrical)	17%
Has problems with minor homeowner repairs (leaky faucets)	16%

Overall housing needs were about the same for all ages of the older adult respondents. The oldest residents, in greatest proportions, reported home maintenance needs. General home safety issues were roughly equivalent across all groups.

In L.A. City, overall housing needs were most prevalent in Council Districts 1, 4 and 14 particularly for housing affordability. Safety concerns were most often voiced in Council Districts 1 and 4, while home maintenance needs were mentioned most often by residents of Council Districts 8 and 15.

For L.A. County, residents in Supervisorial Districts 1 and 2 most often stated overall housing needs and affordability. Supervisorial District 2 showed the greatest need for home maintenance services. Supervisorial Sub-District 2-5, also showed the greatest need for home maintenance. Overall housing needs were the second most important need in Supervisorial Sub-District 2-0. After Supervisorial Sub-District 2-5 residents in Supervisorial Sub-District 2-2 next most often expressed need for home maintenance services.

SPA 4 residents expressed more overall housing need as well as the greatest needs among all the SPAs for affordable and safe housing. Residents of SPA 6, in the highest percentage, expressed needs for assistance with home maintenance.

TRANSPORTATION

Los Angeles has long been dependent on the automobile. In many areas public transportation is unavailable or inconvenient to use. While the general population is looking for alternatives to automobile use, many seniors are forced to give up their automobile because of deteriorating vision, slower reaction time, impaired cognition, or other health issues. The survey questioned seniors about transportation needs and purposes in their geographic area.

In the Los Angeles County study, about one-fifth of older respondents reported having unmet transportation needs for medical appointments, social activities, grocery shopping and for assistance with special needs.

Table 6: Transportation Needs in Los Angeles County

	Percent of respondents with need
Transportation	
Needs, but does not have transportation for medical appointments	19%
Needs, but does not have transportation for social activities	12%
Needs, but does not have transportation for grocery shopping	15%
Needs, but does not have transportation for assistance with special needs	9%

When asked to rate public transportation in Los Angeles County, equal numbers of respondents found it either easy or difficult to use. While two-thirds of senior respondents reported little interest in information related to driving and transportation, about one-third reported interest in either mature driver classes, learning to use public transportation or peer driving programs.

19%
of senior
respondents
lacked
transportation
for medical
appointments

Figure 4: Perception of Public Transportation

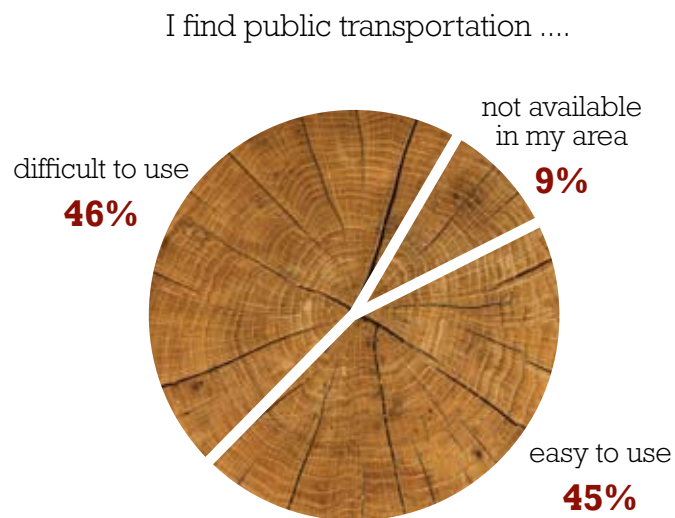


Table 7: Interest in Transportation Classes

I am interested in:	Percent of respondents
Mature driver classes	20%
Learning to use public transportation	14%
Peer driving program	6%

Transportation needs were found to be the greatest for the oldest seniors (age 85+) and for Asians/Pacific Islanders. Older residents of L.A. City Council Districts 1 and 9 indicated in the largest percentage that they had transportation needs. Residents in L.A. County Supervisorial District 1 showed more transportation needs as did residents in Supervisorial Sub-Districts 2-5 and 1-2 and residents in SPA 4.

CAREGIVING

According to the US Census Bureau, American Community Survey 2006, Los Angeles County is home to over 28,000 caregivers over the age of 60. Many of these seniors give care to relatives, sometimes caring for their grandchildren or children of other family members. Approximately 5% of Los Angeles County survey respondents were caregivers to youth relatives.

Being a caregiver can be a challenging experience. Many older caregivers need to quit their jobs or take a leave of absence to care for an older family member or child, while others must delay retirement or take new jobs to pay for additional expenses. Most caregivers are physically and mentally exhausted from these new responsibilities and are forced to deal with new sets of issues, such as whom to call for financial help, how to register the child for school, where to go for medical help, and more.

Los Angeles County caregivers, whether for children or adults, family or others, reported needs in the areas of support, finances and relief. Approximately 8% of the survey respondents reported needing some form of help with their caregiving responsibilities.

Los Angeles City and County Seniors aged 60–74 were somewhat more likely to report caregiving burden than more aged older adults, who, perhaps, more often were recipients of care. Native Americans or Alaskan Natives indicated they faced caregiving burden in greater percents than any other ethnic group. Supervisorial District 2 residents reported concern about caregiver burden in slightly greater percentages, and the same was true for residents of Council Districts 9 and 11. Residents in Supervisorial Sub-Districts 2-1, 2-0 and 4-1, more than others, expressed concerns about caregiving burden. When examining results for the different SPAs, the prevalence of need expressed by residents in SPAs 6 and 8 was greatest.

Conclusions

16,500 seniors living in Los Angeles County have spoken!

This needs assessment provides a valuable tool for policymakers, community-based organizations and the business community to establish priorities and to seek appropriate funding. We can provide estimates of the magnitude of different needs. We can identify the locations and characteristics of the older adult population where those needs are most extensive.

The most prevalent needs found in this study were resident health, especially due to insufficient medical, dental or prescription medication insurance as well as the absence of preventive exams or immunizations. The need for information was great—information on health promotion, benefits such as Social Security, and information related to concerns about safety from fraud, personal or property crimes and abuse. Interest in productive activities such as recreation and volunteerism; needs for assistance with daily activities such as cooking, laundry, routine housework and grocery shopping; and needs for assistance with home maintenance, transportation and housing. All were of great concern for seniors.

This needs assessment has identified opportunities for preventing or delaying dependence, often the most dreaded need that especially afflicts the frail elderly. For more active adults, needs differ. Many of the younger old among Los Angeles County residents wish to benefit from preventive services. If the County is able to create the system and services that appeal to older adults before they become dependent, participation will enhance the sustainable self-sufficiency of older L.A. County residents.



Needs by Age: Mitigating Problems, Delaying Risk

The needs expressed by Los Angeles County's residents age 60–74 in preventive categories are:

- **Health**
- **Affordable healthcare**
- **Preventive services**
- **Health information**
- **Physical exercise**
- **Medication management**

Needs were also expressed in productive activity, employment; recreation and leisure; and civic activity—in all categories of information and assistance, legal, benefits and safety—in caregiving burden and in housing affordability. By addressing the needs in these categories, especially of younger seniors, Los Angeles County has the opportunity to mitigate dependency that is seen at greater rates among Los Angeles County's oldest residents.

The needs that were of vast concern to the oldest residents who participated in this survey are:

- **Daily activities (Basic/Personal and Instrumental)**
- **Social isolation**
- **Home maintenance**
- **Transportation**

This report provides ample empirical evidence about the magnitude of two kinds of need—needs to prevent dependence and needs to mitigate growing dependence.

Needs by Ethnicity and Race

Need occurrence differed for ethnic groups of older Los Angeles County residents. Needs were expressed at elevated rates among ethnic groups rather than Caucasian groups in Los Angeles County.

Native American or Pacific Island residents, residents with Asian ancestry or residents of multiple ethnicities in Los Angeles County reported more:

- **Health needs**
- **Needs for employment**
- **Concerns about social isolation**
- **Caregiving**
- **Housing**
- **Transportation**

Hispanic/Latino residents indicated major problems with:

- **Daily activities (such as walking, bathing, cooking, yard work or laundry)**

Needs by Geography

Although no single Council or Supervisorial District housed residents with the most problems in every category, residents in certain Districts reported problems in greater percentages.

In Council District 1, residents indicated that they had needs related to:

- **Affordable health services**
- **Health information**
- **Employment**
- **Social isolation**
- **Daily living**
- **Housing**
- **Transportation**

Residents in Council District 9 expressed concerns about:

- **Health insurance**
- **Prevention services**
- **Medication management**
- **Employment**
- **Social isolation**
- **Information needs about Social Security, Medi-Cal or IHSS benefits**
- **Daily living**
- **Caregiving**
- **Transportation**

The needs in all Supervisorial Districts were not equal either. In almost all areas studied, residents of Supervisorial Districts 1 or 2 expressed most need. The overall need for productive activity and interest in recreation was greatest in Supervisorial District 3 and interest in community involvement occurred at the highest rate in Supervisorial District 4. Supervisorial District 5 did not report specific standout needs, although certain high needs were reported in supervisorial sub-districts.

The level of need was similarly concentrated among a few Supervisorial Sub-Districts. For most areas studied, residents of Supervisorial Sub-District 2-5 expressed needs at among the highest rates. Less often, but still among the highest percent of need reported, were those in Supervisorial Sub-District 2-0 and, to a lesser extent, those in Supervisorial Sub-Districts 1-2, 4-1 and 4-2. And the greatest needs seemed to be clustered among residents in SPAs 4, 5 and 6.

Policy Implications for the Future

Many demographic projections, policy papers, and scientific studies discussing the impact of an increasingly aging population have been produced. These prepare elected officials, other decision-makers and community members for the new challenges on the horizon. Many visionary pieces have alerted policy makers to the need for change.

However, this research is about Los Angeles County, and it relies, not on an expert's vision, but on the opinions of people who live in the most populous county in California and the nation. It is not a think piece. It is a study for action. In Los Angeles County, the swell in seniors will be especially intense. This stems from the size of the county and its diversity. With almost one-quarter of L.A. County residents expected to be seniors by 2030, the magnitude of these issues and the need for community partnership will be significant.

This report plants the seeds of growth and germinates ideas to develop programs and services that cannot rest on the shoulders of a single agency. The innovations, opportunities and contributions that partnerships among governments, non-profits and private enterprises can foster in older adults, must be channeled through seniors' own desire to contribute to a network of organizational inter-connectivity. In this way, we will improve the lives of all residents and define as champions the community leaders who make it happen. How Los Angeles treats its older adults will define a thriving community or one that withers; this is our challenge as we move through the twenty-first century.

References

- Adler et al. (2005). What do we mean by "Civic Engagement". *Journal of Transformative Education*.
- Bailey, L. (2004). *Aging Americans: Stranded Without Options* (pp. 20): Surface Transportation Policy Project.
- Brandl, B., & Cook-Daniels, L. (2002). *Domestic Abuse Later In Life: A Research Review* (pp. 68): National Clearinghouse on Abuse Later in Life, Wisconsin Coalition Against Domestic Violence, Natl Center on Elder Abuse.
- Butricia, B., & Schaner, S. (2005). *Satisfaction in Engagement and Retirement*.
- Cohen, S., & Lemay, E. P. (in press). *Why Would Social Networks be Linked to Affect and Health Practices?* *Health Psychology*.
- Commission on Affordable Housing and Health Facility Needs for Seniors in the 21st Century. (2002). *The Quiet Crisis: A Report to Congress*.
- Johnson, R. W., & Wiener, J. M. (2006). *A profile of frail older American and their caregivers*: Urban Institute.
- Namkee et al. (2007). *Formal and informal volunteer activity and spousal caregiving among older adults*. *Research on Aging*.
- National Center on Elder Abuse. (2005). *Elder Abuse Prevalence and Incidence* (pp. 2): National Center on Elder Abuse.
- National Institute on Aging. (2006). *Dramatic Changes in U.S. Aging Highlighted in New Census, NIH Report: Impact of Baby Boomers Anticipated*: National Institute on Aging.
- Older Americans Act of 1965. (1965). Retrieved from http://www.aoa.dhhs.gov/about/legbudg/oaaoaa_1965.pdf.
- Walters, N., & Jackson, A. M. (2003). *Identity Theft: Experience of Older Complaints* (pp. 4): AARP.

Appendix A

Acknowledgements

Board of Supervisors

Gloria Molina, Supervisor, First District
Yvonne B. Burke, Supervisor, Second District
Zev Yaroslavsky, Supervisor, Third District
Don Knabe, Supervisor, Fourth District
Michael D. Antonovich, Supervisor, Fifth District

Los Angeles City Council Members

Mayor Antonio R. Villaraigosa, the 41st Mayor of Los Angeles
Council District 1 - Ed Reyes
Council District 2 - Wendy Greuel
Council District 3 - Dennis P. Zine
Council District 4 - Tom LaBonge
Council District 5 - Jack Weiss
Council District 6 - Tony Cardenas
Council District 7 - Richard Alarcón
Council District 8 - Bernard Parks
Council District 9 - Jan Perry
Council District 10 - Herb J. Wesson, Jr.
Council District 11 - Bill Rosendahl
Council District 12 - Greig Smith
Council District 13 - Eric Garcetti
Council District 14 - José Huizar
Council District 15 - Janice Hahn

Needs Assessment Committee

Natalie Ambrose, L.A. County Commission on Aging (LACCOA) Commissioner
Cynthia D. Banks, Director, County of Los Angeles Community and Senior Services (CSS)
Pete Fonda-Bonardi, Information System Specialist 1, County of Los Angeles Urban Research
Amos Fried, M.S., L.A. County senior resident
Marilyn Fried, M.S.W., LACCOA Commissioner, Committee Chair
Jay Jonathan Glassman, J.D., Division Chief, CSS Strategic Planning and Special Projects
Rochelle Le Blanc, M.P.A., Management Analyst, City of Los Angeles Department of Aging
Alex McSweyn, M.A., Senior Analyst, CSS Strategic Planning and Special Projects
Doreen Moore, LACCOA Commissioner and Past Committee Chair
Constance Sullivan, DrPH, Manager, Chief Executive Office
Laura Trejo, M.S.G., M.P.A., General Manager, City of Los Angeles Department of Aging
Bernard Weintraub, M.P.H., LACCOA Commissioner and Past Committee Chair
Judith L. Zarkin, Ph.D., California State University, Northridge

Panel of Academic Gerontologists

Valentine Villa, Ph.D.

Professor, School of Social Work, College of Health and Human Services
Interim Associate Director, the Applied Gerontology Center
Adjunct Associate Professor, School of Public Health, UCLA
California State University, Los Angeles

Debra Sheets, Ph.D., MSN, RN

Associate Professor of Nursing and Gerontology
Department of Health Sciences
California State University, Northridge

W. June Simmons, MSW

Chief Executive Officer
Partners in Care Foundation

Kathleen Wilber, Ph.D.

Mary Pickford Foundation Professor of Gerontology
Professor of Health Services Administration
Leonard Davis School of Gerontology
University of Southern California

Many thanks to the seniors who generously shared their information and made this project possible.

Thanks to the following organizations for their generous contributions to the development of this survey report:

Kaiser Permanente
The California Community Foundation
The Los Angeles County Commission on Aging
CVS Pharmacy

This report was written in collaboration with the Needs Assessment Committee and: AFRA Consulting, The National Research Center, Inc. and San Luis Design.

Appendix B

Detailed Study Methods

The Needs Assessment Committee and History of the Project

The Los Angeles County Commission on Aging (LACCOA) formed a Needs Assessment Committee in 2005. The committee included several commissioners from LACCOA, staff members from County of Los Angeles Community and Senior Services (CSS) and staff from the City of Los Angeles Department of Aging. The first chair of the Committee was Commissioner Doreen Moore. In 2006, LACCOA President Bernard Weintraub became chair followed by Commissioner Marilyn Fried in 2007. The Commission named the needs assessment survey project, “L.A. County Seniors Count!”

Most of the funding for the project came from CSS. Additional grant funds came from the Kaiser Foundation, CVS Pharmacy, the Los Angeles County Commission on Aging and the California Community Foundation. In addition, other County of Los Angeles departments and the City of Los Angeles made in-kind contributions of staff and other resources.

The basis of “L.A. County Seniors Count!” was a large-scale survey of Los Angeles County residents age 60 and older. Los Angeles County previously had performed needs assessments as part of its Area Plan on Aging. Past assessments were based on secondary data and public hearings with local service providers. The Committee considered data options for the needs assessment—ultimately selecting an older adult survey because it was believed to provide a more representative, objective and quantitative view of senior needs in the county.

The study consisted of individual components grouped into several steps: Instrument Development (instrument construction and pilot testing), Survey Administration (publicity to recruit seniors, meeting with principals to help with dissemination, distribution of survey), Information Dissemination (press release with Board of Supervisors, public hearings to introduce survey) and Data Analysis and Reporting (data entry, data analysis, literature search on nationwide senior needs assessments and gerontology review, report preparation).

Instrument Development and Kick-off

Members of the Needs Assessment Committee reviewed several survey instruments used in other counties and based some of its survey questions on those used elsewhere. The Needs Assessment Committee added demographic questions and modified the format with the goal of making the tool user-friendly for senior respondents. The survey was designed to require less than ten minutes of an older resident's time.

The project was presented to a group of principals that included representatives of city and county departments in the County of Los Angeles and City of Los Angeles. The group also included religious groups, community-based organizations, the County Area Agency on Aging Advisory Council, and the City Council on Aging.

Printed copies of the survey were made available in English, Spanish, Chinese, Tagalog, Korean, Armenian and Japanese. An online version survey was posted in English and Spanish using Survey Monkey, an Internet-based surveying tool.

The County of Los Angeles Board of Supervisors endorsed the survey by unanimous motion.

Survey Administration

The criteria for inclusion in the study were Los Angeles County residency and being age 60 or older. Approximately 100,000 surveys were printed and were sent or hand-delivered to senior centers, nutrition sites, home-delivered meals routes, community centers, libraries, election polling places, the Los Angeles County Fair and other places serving seniors. Committee members coordinated the distribution of surveys.

Press releases notified the senior community about the survey and where seniors could fill out the survey form. Seniors could also call and request a form by telephone or fill out the survey online.

Surveys were collected from individual sites or returned by mail to CSS. ZIP Codes of the completed questionnaires were retrieved by CSS and sent to the Urban Research Division, Service Integration Branch of the County of Los Angeles Chief Executive Office. Urban Research created weekly maps with response rates by ZIP Code. Subsequent survey distribution efforts then were targeted to ZIP Codes with lower response rates.

About 16,500 surveys were completed. A precise response rate cannot be calculated for several reasons including the unknown total of surveys distributed (because there were both hard copies and a Web option) and having no estimate of the number of ineligible survey recipients. However, the total number of returned surveys represents an approximate response rate of 16.5% (out of the total printed survey distribution).

Data Analysis and Reporting

Research services were contracted by the committee to enter, analyze and report the survey data. The firm also conducted the national needs assessment review and review of the gerontological literature.

DATA ENTRY AND ANALYSIS

Data entry for the paper forms was completed by a firm using Survey Monkey. A survey research consultant was contracted to produce statistical analyses of data collected by Los Angeles County based on the 16,500 completed surveys. The data previously had been entered into two electronic datasets. The data were imported into the Statistical Package for the Social Sciences (SPSS). The first step was to clean the data, identifying any inappropriate or mismatched values between the two datasets. Using the weighted data, tables of basic frequencies were created, as were cross-tabulations of data by various sociodemographic and geographic characteristics and for select survey questions. Factor analysis was run on all survey items that related to potential respondent needs, identifying need categories useful for summarizing findings.

DATA WEIGHTING

Los Angeles County identified various ways in which to group respondents' ZIP Codes to create useful geographic categories such as regional "clusters" and Supervisorial Districts. The ZIP Code clusters were used to weight the sociodemographic profile (based on age, sex and race/ethnicity) of respondents in each cluster to better match the U.S. Census profile of the County. The results of the weighting scheme are presented in the following table.

Results of Weighting Scheme

	U.S. Census Population Norm	Unweighted survey %	Weighted survey %
Males 60-74	30.0%	15.2%	29.3%
Males 75-84	10.1%	13.2%	9.3%
Males 85+	2.6%	4.8%	4.2%
Females 60-74	36.0%	29.9%	35.6%
Females 75-84	15.4%	25.6%	14.6%
Females 85+	5.9%	11.4%	6.9%
	100.0%	100.0%	100.0%
White	55.9%	46.4%	55.2%
Hispanic	22.7%	19.1%	23.3%
Black	10.2%	13.2%	9.3%
Asian	9.9%	17.2%	9.8%
Other race	1.4%	4.1%	2.5%
	100.0%	100.0%	100.0%

NATIONAL SEARCH FOR SENIOR NEEDS ASSESSMENT SURVEY REPORTS

A nationwide search for senior needs assessment survey reports from the previous ten years was conducted. Using the Internet, direct telephone, mail and e-mail requests, reports were sought from Area Agencies on Aging (AAAs), state departments of aging, other planning and advocacy organizations (such as AARP) and local governments (cities and counties). The search took place from early September through the end of October of 2007. The initial search was done using search engines such as Google™, Yahoo®, Ask™ and Journal Storage (JSTOR), as well as academic databases available online and other sources, using phrases such as “needs assessment,” “older adult survey,” “Area Agency on Aging/AAA” and more. After initial success using this set of terms, the search terms were combined with individual state names and geographic terms (such as “region,” “west,” etc.) to yield additional results. Many successful searches led to online “rabbit holes” that led to additional reports or yielded new effective paths for searching. Among these were Web sites for institutions of higher learning (especially those with a focus on academic department on aging), state and other government Web

sites, human service organizations, private institutions and research consortiums. When a reference to a needs assessment survey was found but a link to the entire report was absent, follow-up telephone calls were made and e-mails were sent to the organization to request the report. When a document was found that was not a needs assessment survey report, but referenced such studies, citation/bibliography information was used to pursue those specific titles, authors and agencies via Web searches, telephone calls and e-mail contacts.

To offer additional coverage of AAAs, the approximately 600 AAAs in the U.S. were contacted by mail to request their senior needs assessment survey reports. The mailing included a cover letter and postage-paid return postcard, on which AAA staff indicated if their AAA had done at least one needs assessment survey since 1997 and provided information about how to obtain a copy of the needs assessment survey report(s).

Each report was reviewed and analyzed. Characteristics of each report were recorded in a Microsoft® Access database. While individual report structures and content varied, the database permitted all comparable information to be combined for later synthesis.

DESCRIPTION OF THE COVERAGE

Overall, the search was broad and this collection of reports is the largest and most robust listing of older adult needs assessment survey reports in existence. 210 needs assessment survey reports were found. Most of the survey reports found were from recent years (2004 and later) with fewer going back to 1997.

Older adult needs assessment survey reports were collected across the country. The states from which survey reports most commonly were found were California, Kentucky and Texas.

DATA ANALYSIS

To compare methods and results across needs assessment survey reports, a data collection protocol was created to include information about each study's design, methods and results. Features of each study dimension were mapped to common categories to facilitate direct comparison. All of the study information was stored electronically and summarized in analysis.

LITERATURE REVIEW OF GERONTOLOGICAL STUDIES

In addition to the needs assessment search, a Web-based literature review was conducted in December 2007 covering 15 topic areas. Although this literature search was far-reaching in many respects, it was not exhaustive. The search focused on research, reports and fact sheets that were 1) produced primarily in the last five years and 2) relevant to older adults across the United States. Much of the current literature is influenced by the Baby Boomers pending move into retirement. Review articles, white papers and fact sheets produced by federal agencies outlining the key issues and emerging trends in older adult health and lifestyles were critical elements of this review, as public entities are a main source of research and information in this area.

The 15 content areas were each researched using key words specific to the topics. Key word search terms were used in Web search engines as well as in academic databases that publish scholarly articles. Common research terms are included in parentheses next to each topic area.

- **Activities of daily living (ADL, IADL)**
- **Caregiving (care, long-term care, caregiver, end of life, caregiver burden)**
- **Civic engagement (civic engagement, Boomers civic, volunteer, voting)**
- **Community design (built environment, ease of navigation by walking, community design)**
- **Demographic trends and population projections (trends, national, population projection, future demographics)**
- **Education (lifelong learning, education, continuing education, mental stimulation)**
- **Employment (work, retirement, employer)**
- **Finances (finance, money, security, financial abuse)**
- **Health and wellness (health, wellness, falls, independence)**
- **Housing (home, residential care, affordable housing)**
- **Legal issues (legal, abuse, financial abuse, elder abuse, end of life)**
- **Long-term care**
- **Quality of life**
- **Social support and engagement**
- **Transportation**

Appendix C

Crosstabulation of Results

Table 8: Health Needs by Age, Sex and Race

	Insurance	Affordability	Preventive services	Physical exercise	Medication management	Health information
60 to 74	67%	28%	70%	58%	23%	36%
75 to 84	68%	20%	57%	50%	20%	28%
85 and over	74%	17%	61%	40%	21%	21%
Overall	68%	25%	66%	54%	22%	32%
Female	68%	25%	65%	55%	22%	32%
Male	68%	25%	67%	52%	23%	33%
Overall	68%	25%	66%	54%	22%	32%
Hispanic/Latino	70%	33%	74%	51%	24%	37%
Black/African American	67%	27%	75%	53%	27%	34%
Asian/Pacific Islander	73%	40%	76%	61%	33%	52%
White/Caucasian	67%	18%	59%	54%	18%	27%
Native American/Alaskan Native	78%	44%	81%	54%	26%	43%
Multi-ethnic	66%	37%	72%	59%	31%	47%
Other	68%	33%	72%	57%	31%	39%
Overall	68%	25%	66%	54%	22%	33%

Table 9: Health Needs by Council District

	Insurance	Affordability	Preventive services	Physical exercise	Medication management	Health information
District 1	71%	46%	77%	51%	26%	42%
District 2	62%	15%	57%	52%	15%	33%
District 3	68%	20%	48%	64%	20%	33%
District 4	68%	28%	68%	51%	21%	33%
District 5	68%	20%	54%	60%	21%	30%
District 6	68%	28%	66%	45%	21%	29%
District 7	68%	22%	67%	54%	20%	37%
District 8	69%	23%	76%	56%	23%	33%
District 9	79%	38%	82%	50%	33%	33%
District 10	70%	26%	69%	61%	20%	41%
District 11	66%	18%	58%	64%	20%	32%
District 12	54%	15%	57%	54%	18%	33%
District 13	69%	26%	64%	62%	21%	36%
District 14	62%	28%	70%	55%	25%	38%
District 15	70%	30%	71%	49%	28%	28%
Overall	67%	24%	64%	56%	22%	34%

Table 10: Health Needs by Supervisorial District

	Insurance	Affordability	Preventive services	Physical exercise	Medication management	Health information
District 1	70%	33%	73%	50%	24%	36%
District 2	69%	28%	73%	55%	25%	36%
District 3	66%	22%	59%	56%	19%	31%
District 4	70%	23%	66%	55%	22%	31%
District 5	66%	22%	63%	52%	21%	30%
Overall	68%	25%	66%	54%	22%	32%

Table 11: Health Needs by Supervisorial Sub-District

	Insurance	Affordability	Preventive services	Physical exercise	Medication management	Health information
1-1	71%	35%	74%	51%	26%	35%
1-2	65%	30%	71%	55%	22%	42%
1-3	72%	31%	72%	47%	22%	34%
2-0	71%	49%	84%	53%	35%	46%
2-1	66%	35%	74%	55%	30%	35%
2-2	72%	26%	82%	44%	24%	32%
2-3	63%	27%	78%	51%	27%	34%
2-4	71%	30%	69%	54%	30%	36%
2-5	67%	53%	80%	72%	53%	62%
2-6	69%	22%	66%	63%	20%	38%
3-1	68%	26%	64%	55%	23%	30%
3-2	64%	19%	57%	51%	17%	32%
3-3	67%	17%	48%	67%	18%	30%
4-1	74%	33%	68%	55%	34%	32%
4-2	75%	26%	74%	45%	19%	30%
4-3	62%	26%	63%	63%	26%	41%
4-4	66%	20%	62%	58%	27%	28%
4-5	68%	16%	60%	58%	15%	28%
4-6	69%	21%	64%	55%	19%	31%
5-1	69%	23%	70%	44%	21%	23%
5-2	65%	21%	65%	53%	22%	33%
5-3	70%	26%	68%	47%	21%	24%
5-4	59%	18%	63%	58%	23%	34%
5-5	68%	23%	57%	52%	19%	28%
Overall	68%	25%	66%	54%	22%	32%

Table 12: Health Needs by Service Planning Area

	Insurance	Affordability	Preventive services	Physical exercise	Medication management	Health information
SPA 1	69%	23%	70%	44%	21%	23%
SPA 2	64%	19%	59%	53%	19%	31%
SPA 3	68%	25%	63%	56%	21%	33%
SPA 4	69%	34%	70%	56%	25%	39%
SPA 5	67%	19%	58%	61%	19%	30%
SPA 6	70%	28%	78%	49%	25%	33%
SPA 7	72%	27%	73%	48%	21%	32%
SPA 8	70%	26%	67%	56%	27%	31%
Overall	68%	25%	66%	54%	22%	32%

Table 13: Productive Activity Needs by Age, Sex and Race

	Employment	Social activity	Recreation and leisure	Civic activity
60 to 74	22%	28%	49%	39%
75 to 84	8%	28%	44%	33%
85 and over	4%	34%	35%	24%
Overall	17%	29%	46%	36%
Female	14%	30%	47%	37%
Male	20%	28%	46%	34%
Overall	17%	29%	46%	36%
Hispanic/Latino	23%	35%	36%	27%
Black/African American	22%	25%	44%	34%
Asian/Pacific Islander	24%	33%	46%	35%
White/Caucasian	11%	26%	51%	40%
Native American/Alaskan Native	30%	30%	64%	50%
Multi-ethnic	23%	37%	61%	48%
Other	24%	39%	42%	38%
Overall	17%	29%	46%	36%

Table 14: Productive Activity Needs by Council District

	Employment	Social activity	Recreation and leisure	Civic activity
District 1	27%	37%	35%	28%
District 2	15%	24%	54%	44%
District 3	16%	29%	60%	44%
District 4	19%	32%	43%	41%
District 5	18%	31%	51%	42%
District 6	20%	32%	42%	29%
District 7	14%	35%	42%	28%
District 8	18%	28%	43%	31%
District 9	20%	44%	38%	32%
District 10	20%	24%	45%	40%
District 11	15%	27%	57%	43%
District 12	12%	26%	62%	41%
District 13	21%	26%	51%	37%
District 14	18%	33%	40%	30%
District 15	13%	26%	37%	30%
Overall	17%	30%	47%	37%

Table 15: Productive Activity Needs by Supervisorial District

	Employment	Social activity	Recreation and leisure	Civic activity
District 1	18%	32%	36%	28%
District 2	20%	30%	44%	34%
District 3	17%	31%	51%	39%
District 4	15%	27%	49%	40%
District 5	15%	26%	48%	36%
Overall	17%	29%	46%	36%

Table 16: Productive Activity Needs by Supervisorial Sub-District

	Employment	Social activity	Recreation and leisure	Civic activity
1-1	19%	34%	33%	27%
1-2	18%	35%	37%	28%
1-3	18%	28%	38%	28%
2-0	28%	45%	44%	34%
2-1	19%	28%	39%	30%
2-2	19%	33%	34%	26%
2-3	23%	24%	36%	31%
2-4	21%	32%	49%	33%
2-5	21%	57%	77%	43%
2-6	19%	25%	49%	41%
3-1	19%	32%	49%	41%
3-2	15%	32%	48%	33%
3-3	14%	25%	63%	47%
4-1	22%	33%	58%	44%
4-2	14%	27%	38%	26%
4-3	16%	29%	48%	50%
4-4	10%	25%	50%	42%
4-5	12%	23%	52%	44%
4-6	13%	23%	48%	36%
5-1	13%	24%	43%	29%
5-2	14%	28%	46%	37%
5-3	21%	30%	49%	31%
5-4	16%	28%	58%	38%
5-5	16%	24%	50%	39%
Overall	16%	29%	46%	36%

Table 17: Productive Activity Needs by Service Planning Area

	Employment	Social activity	Recreation and leisure	Civic activity
SPA 1	13%	24%	43%	29%
SPA 2	15%	29%	51%	36%
SPA 3	16%	26%	47%	38%
SPA 4	22%	33%	42%	37%
SPA 5	14%	29%	54%	44%
SPA 6	19%	29%	40%	30%
SPA 7	15%	30%	37%	28%
SPA 8	17%	29%	49%	40%
Overall	16%	29%	46%	36%

Table 18: Information and Assistance Needs by Age, Sex and Race

	Legal information and assistance	Benefit information and assistance	Safety information and assistance
60 to 74	42%	40%	53%
75 to 84	33%	31%	50%
85 and over	28%	33%	42%
Overall	38%	37%	51%
Female	37%	36%	52%
Male	39%	40%	50%
Overall	38%	37%	51%
Hispanic/Latino	33%	45%	52%
Black/African American	47%	41%	60%
Asian/Pacific Islander	35%	58%	55%
White/Caucasian	39%	29%	48%
Native American/ Alaskan Native	58%	44%	64%
Multi-ethnic	51%	54%	60%
Other	39%	50%	49%
Overall	38%	37%	51%

Table 19: Information and Assistance Needs by Council District

	Legal information and assistance	Benefit information and assistance	Safety information and assistance
District 1	28%	46%	47%
District 2	39%	28%	48%
District 3	41%	32%	53%
District 4	40%	39%	48%
District 5	40%	29%	48%
District 6	34%	33%	53%
District 7	33%	44%	50%
District 8	43%	40%	58%
District 9	41%	58%	55%
District 10	41%	35%	60%
District 11	43%	35%	48%
District 12	37%	36%	55%
District 13	34%	41%	49%
District 14	35%	44%	54%
District 15	35%	34%	52%
Overall	38%	37%	52%

Table 20: Information and Assistance Needs by Supervisorial District

	Legal information and assistance	Benefit information and assistance	Safety information and assistance
District 1	33%	46%	51%
District 2	42%	40%	56%
District 3	38%	35%	48%
District 4	37%	33%	50%
District 5	39%	36%	50%
Overall	38%	37%	51%

Table 21: Information and Assistance Needs by Supervisorial Sub-District

	Legal information and assistance	Benefit information and assistance	Safety information and assistance
1-1	31%	45%	50%
1-2	31%	53%	61%
1-3	35%	45%	48%
2-0	38%	55%	57%
2-1	45%	41%	53%
2-2	39%	43%	56%
2-3	44%	47%	55%
2-4	43%	36%	51%
2-5	70%	65%	72%
2-6	41%	34%	57%
3-1	41%	38%	45%
3-2	34%	34%	51%
3-3	42%	29%	50%
4-1	38%	38%	50%
4-2	38%	29%	48%
4-3	48%	44%	54%
4-4	36%	27%	53%
4-5	38%	30%	47%
4-6	29%	33%	55%
5-1	40%	36%	55%
5-2	38%	35%	47%
5-3	49%	36%	42%
5-4	39%	37%	55%
5-5	39%	37%	52%
Overall	38%	37%	51%

Table 22: Information and Assistance Needs by Service Planning Area

	Legal information and assistance	Benefit information and assistance	Safety information and assistance
SPA 1	40%	36%	55%
SPA 2	37%	33%	49%
SPA 3	39%	41%	51%
SPA 4	37%	43%	53%
SPA 5	41%	31%	45%
SPA 6	42%	42%	57%
SPA 7	33%	38%	52%
SPA 8	39%	36%	50%
Overall	38%	37%	51%

**Table 23: Daily Activities Needs
by Age, Sex and Race**

	Percent of respondents
60 to 74	47%
75 to 84	55%
85 and over	68%
Overall	51%
Female	54%
Male	48%
Overall	51%
Hispanic/Latino	63%
Black/African American	57%
Asian/Pacific Islander	51%
White/Caucasian	45%
Native American/Alaskan Native	53%
Multi-ethnic	58%
Other	56%
Overall	51%

**Table 24: Daily Activities Needs
by Council District**

	Percent of respondents
District 1	56%
District 2	41%
District 3	47%
District 4	57%
District 5	43%
District 6	50%
District 7	55%
District 8	60%
District 9	70%
District 10	44%
District 11	45%
District 12	51%
District 13	47%
District 14	57%
District 15	54%
Overall	51%

**Table 25: Daily Activities Needs
by Supervisorial District**

	Percent of respondents
District 1	58%
District 2	54%
District 3	49%
District 4	48%
District 5	50%
Overall	51%

**Table 26: Daily Activities Needs
by Supervisorial Sub-District**

	Percent of respondents
1-1	57%
1-2	63%
1-3	57%
2-0	67%
2-1	55%
2-2	62%
2-3	54%
2-4	55%
2-5	76%
2-6	45%
3-1	53%
3-2	48%
3-3	44%
4-1	53%
4-2	56%
4-3	53%
4-4	49%
4-5	39%
4-6	41%
5-1	48%
5-2	50%
5-3	51%
5-4	51%
5-5	50%
Overall	51%

**Table 27: Daily Activities Needs
by Service Planning Area**

	Percent of respondents
SPA 1	48%
SPA 2	49%
SPA 3	50%
SPA 4	56%
SPA 5	43%
SPA 6	61%
SPA 7	55%
SPA 8	49%
Overall	51%

Table 28: Housing Needs by Age, Sex and Race

	Affordability	Safety	Home maintenance
60 to 74	28%	6%	30%
75 to 84	20%	6%	37%
85 and over	15%	5%	41%
Overall	24%	6%	33%
Female	23%	6%	37%
Male	27%	6%	28%
Overall	25%	6%	33%
Hispanic/Latino	30%	7%	32%
Black/African American	27%	7%	38%
Asian/Pacific Islander	33%	7%	30%
White/Caucasian	20%	5%	34%
Native American/ Alaskan Native	45%	7%	34%
Multi-ethnic	39%	6%	41%
Other	39%	8%	35%
Overall	25%	6%	33%

Table 29: Housing Needs by Council District

	Affordability	Safety	Home maintenance
District 1	37%	10%	29%
District 2	15%	1%	27%
District 3	22%	5%	36%
District 4	36%	12%	31%
District 5	23%	7%	29%
District 6	26%	6%	31%
District 7	22%	4%	33%
District 8	22%	6%	43%
District 9	35%	9%	35%
District 10	22%	4%	24%
District 11	20%	5%	32%
District 12	22%	5%	38%
District 13	29%	3%	26%
District 14	35%	7%	36%
District 15	24%	8%	40%
Overall	25%	6%	33%

Table 30: Housing Needs by Supervisorial District

	Affordability	Safety	Home maintenance
District 1	28%	6%	33%
District 2	28%	7%	36%
District 3	24%	6%	31%
District 4	21%	6%	33%
District 5	24%	6%	33%
Overall	24%	6%	33%

Table 31: Housing Needs by Supervisorial Sub-District

	Affordability	Safety	Home maintenance
1-1	30%	7%	32%
1-2	34%	7%	35%
1-3	23%	5%	33%
2-0	48%	9%	37%
2-1	27%	6%	38%
2-2	29%	5%	43%
2-3	29%	9%	21%
2-4	33%	11%	40%
2-5	43%	24%	74%
2-6	22%	5%	31%
3-1	29%	9%	29%
3-2	22%	4%	31%
3-3	19%	4%	36%
4-1	35%	11%	33%
4-2	22%	5%	35%
4-3	21%	10%	39%
4-4	15%	7%	37%
4-5	13%	4%	31%
4-6	16%	4%	29%
5-1	24%	7%	32%
5-2	27%	6%	31%
5-3	25%	4%	29%
5-4	22%	6%	40%
5-5	18%	5%	36%
Overall	24%	6%	33%

Table 32: Housing Needs by Service Planning Area

	Affordability	Safety	Home maintenance
SPA 1	24%	7%	32%
SPA 2	23%	5%	32%
SPA 3	22%	6%	34%
SPA 4	34%	10%	30%
SPA 5	21%	5%	31%
SPA 6	26%	6%	41%
SPA 7	23%	4%	33%
SPA 8	24%	8%	33%
Overall	24%	6%	33%

Table 33: Transportation Needs by Age, Sex and Race

	Percent of respondents
60 to 74	23%
75 to 84	25%
85 and over	31%
Overall	24%
Female	25%
Male	22%
Overall	24%
Hispanic/Latino	34%
Black/African American	25%
Asian/Pacific Islander	40%
White/Caucasian	17%
Native American/Alaskan Native	21%
Multi-ethnic	28%
Other	39%
Overall	24%

Table 34: Transportation Needs by Council District

	Percent of respondents
District 1	42%
District 2	12%
District 3	16%
District 4	33%
District 5	20%
District 6	21%
District 7	24%
District 8	26%
District 9	40%
District 10	25%
District 11	17%
District 12	14%
District 13	27%
District 14	34%
District 15	26%
Overall	24%

Table 35: Transportation Needs by Supervisorial District

	Percent of respondents
District 1	33%
District 2	26%
District 3	22%
District 4	21%
District 5	21%
Overall	24%

Table 36: Transportation Needs by Supervisorial Sub-District

	Percent of respondents
1-1	37%
1-2	40%
1-3	27%
2-0	33%
2-1	27%
2-2	28%
2-3	27%
2-4	27%
2-5	67%
2-6	21%
3-1	28%
3-2	20%
3-3	12%
4-1	33%
4-2	22%
4-3	30%
4-4	20%
4-5	14%
4-6	15%
5-1	15%
5-2	26%
5-3	24%
5-4	14%
5-5	17%
Overall	24%

**Table 37: Transportation Needs
by Service Planning Area**

	Percent of respondents
SPA 1	15%
SPA 2	20%
SPA 3	24%
SPA 4	34%
SPA 5	20%
SPA 6	27%
SPA 7	25%
SPA 8	24%
Overall	24%

**Table 38: Caregiving Needs
by Age, Sex and Race**

	Percent of respondents
60 to 74	9%
75 to 84	6%
85 and over	6%
Overall	8%
Female	7%
Male	9%
Overall	8%
Hispanic/Latino	8%
Black/African American	10%
Asian/Pacific Islander	14%
White/Caucasian	6%
Native American/Alaskan Native	18%
Multi-ethnic	15%
Other	8%
Overall	8%

**Table 39: Caregiving Needs
by Council District**

	Percent of respondents
District 1	9%
District 2	4%
District 3	8%
District 4	8%
District 5	7%
District 6	9%
District 7	8%
District 8	7%
District 9	11%
District 10	8%
District 11	6%
District 12	10%
District 13	9%
District 14	8%
District 15	9%
Overall	8%

**Table 40: Caregiving Needs
by Supervisorial District**

	Percent of respondents
District 1	8%
District 2	10%
District 3	7%
District 4	9%
District 5	6%
Overall	8%

**Table 41: Caregiving Needs
by Supervisorial Sub-District**

	Percent of respondents
1-1	8%
1-2	10%
1-3	8%
2-0	13%
2-1	15%
2-2	10%
2-3	4%
2-4	10%
2-5	0%
2-6	8%
3-1	7%
3-2	7%
3-3	7%
4-1	14%
4-2	9%
4-3	10%
4-4	11%
4-5	5%
4-6	8%
5-1	8%
5-2	5%
5-3	4%
5-4	10%
5-5	6%
Overall	8%

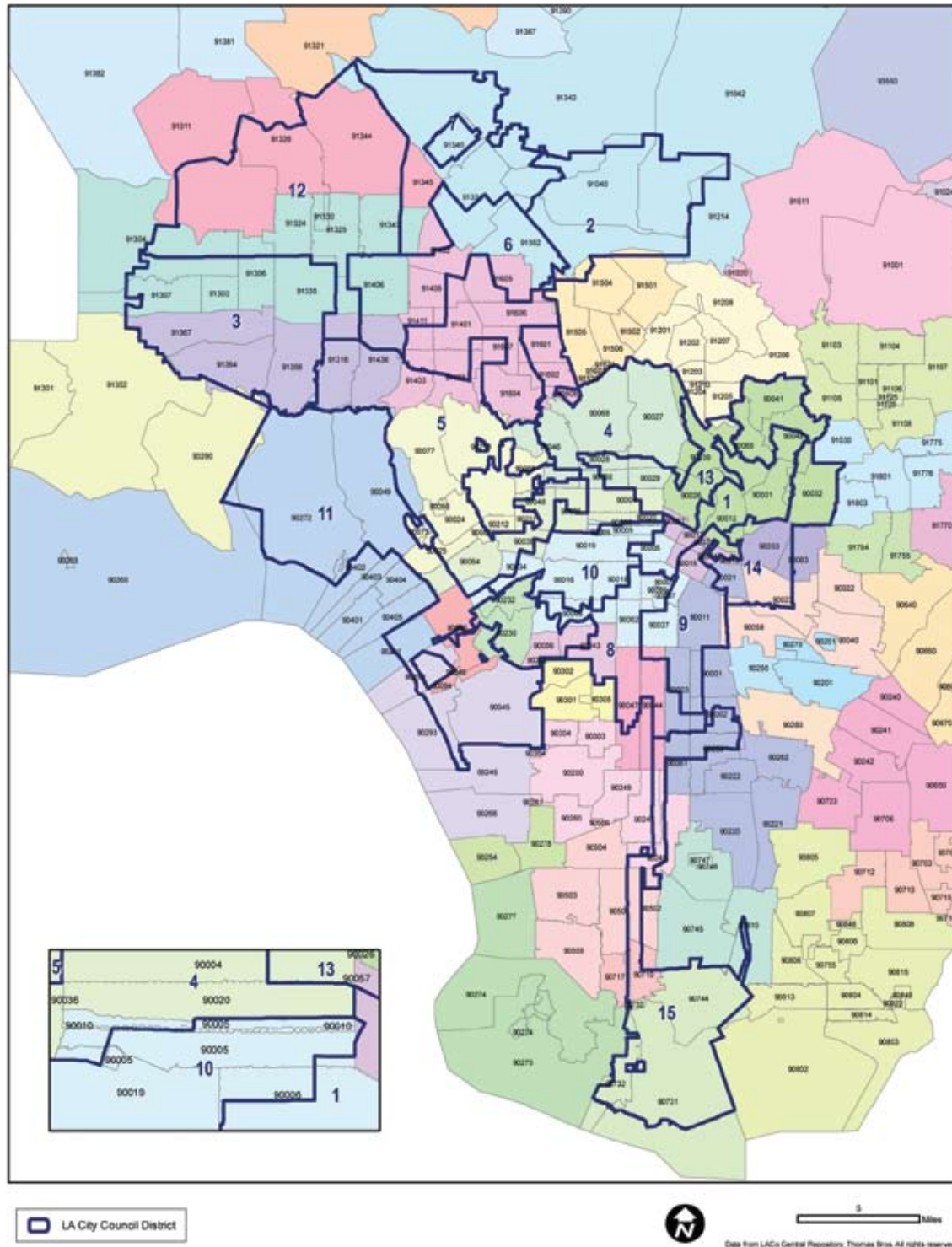
**Table 42: Caregiving Needs
by Service Planning Area**

	Percent of respondents
SPA 1	8%
SPA 2	6%
SPA 3	7%
SPA 4	8%
SPA 5	6%
SPA 6	10%
SPA 7	9%
SPA 8	10%
Overall	8%

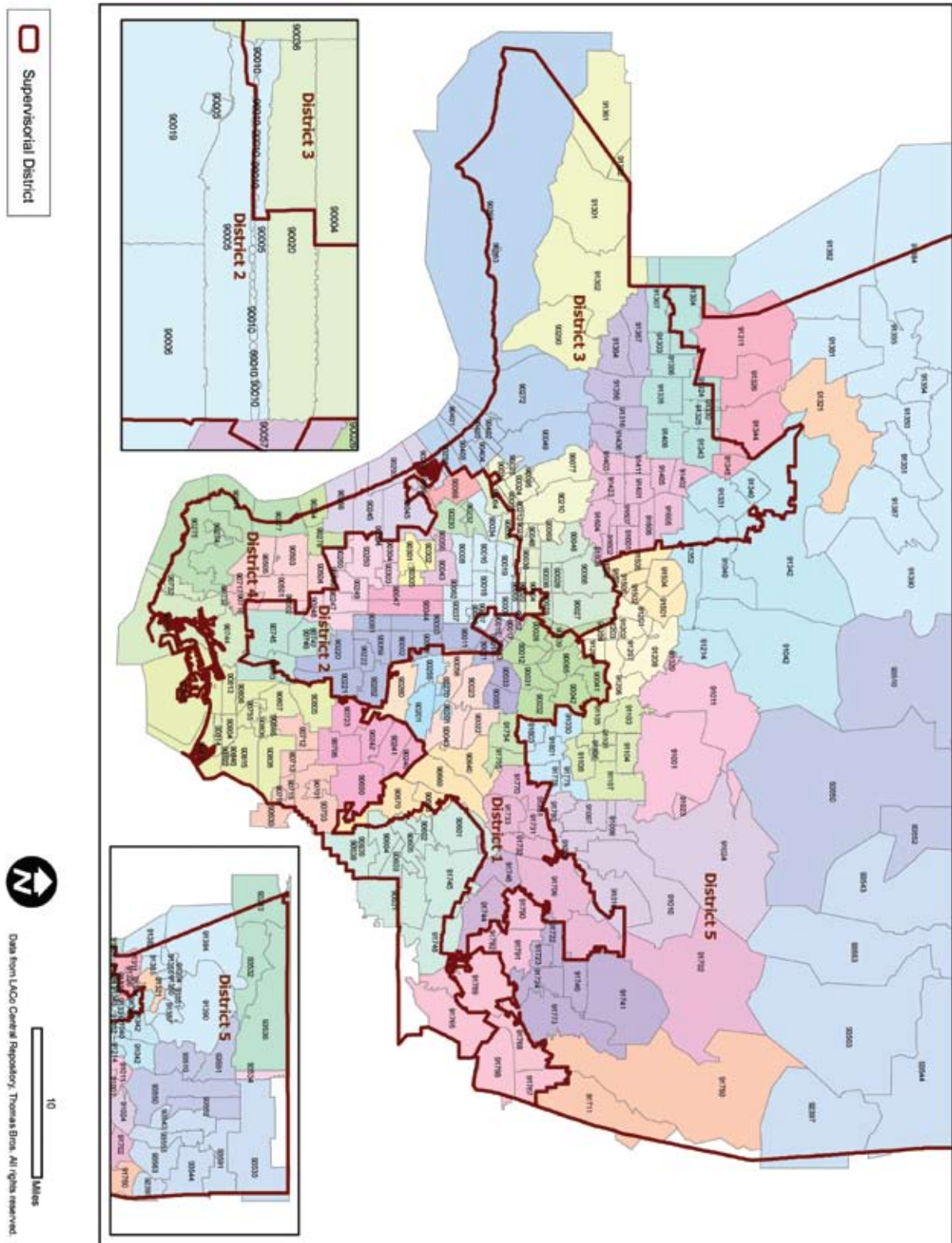
Appendix D

Maps

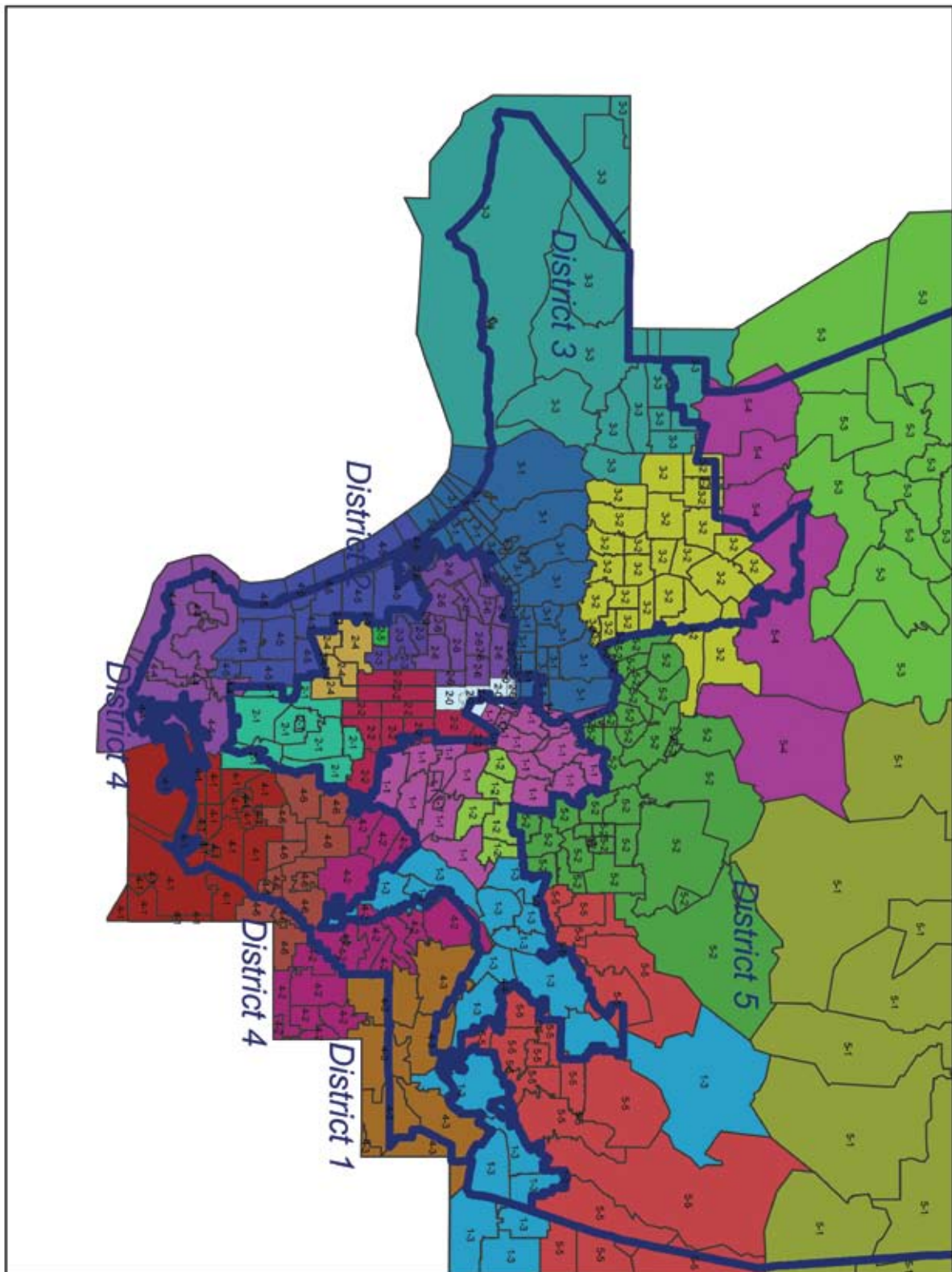
City of Los Angeles Council Districts Map



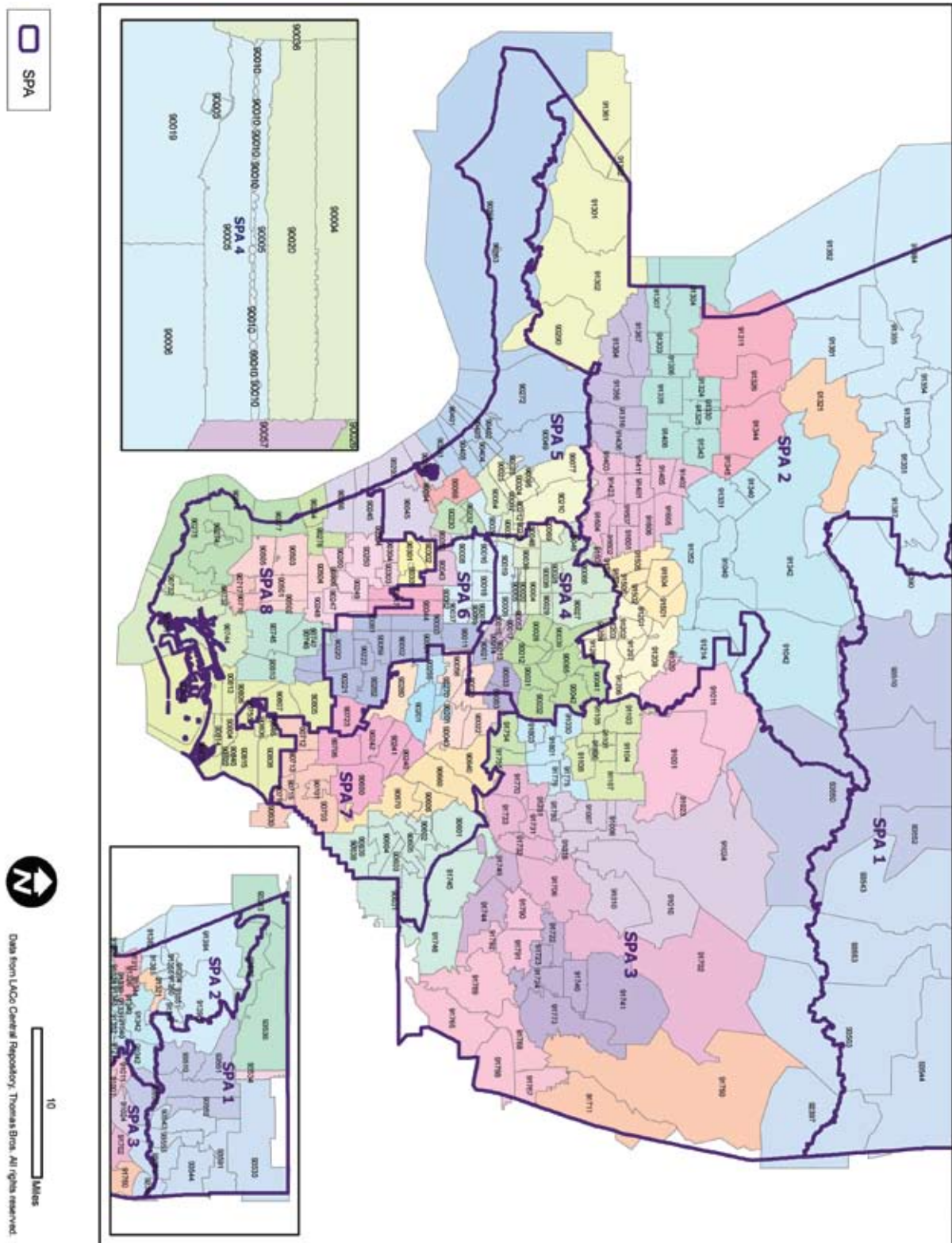
County of Los Angeles Supervisorial Districts Map



County of Los Angeles Supervisorial Sub-Districts Map



County of Los Angeles Service Planning Areas (SPAs) Map



Appendix E

Survey Instrument

L. A. County Seniors Count! **Survey of Adult and Aging Population (in English)**

1. My zip code is: _____
2. I was born in the year: _____.
3. I have lived in this community for _____ years.
4. My gender is:
☐ female ☐ male
5. My marital status is:
☐ now married ☐ separated ☐ never married
☐ widowed ☐ divorced ☐ other _____
6. My education level is:
☐ 0 to 8th grade ☐ 9th to 12th grade ☐ some college ☐ college graduate
7. My income source(s) is(are): (CHECK ALL THAT APPLY)
☐ employment ☐ investments ☐ Social Security ☐ pension
☐ Supplemental Security Income (SSI) / Social Security Pension (SSP)
8. My ethnic group is:
☐ Hispanic / Latino ☐ Black / African American ☐ Asian / Pacific Islander
☐ White / Caucasian ☐ Native American / Alaskan Native ☐ Multi-Ethnic
☐ other _____

DAILY TASKS

	no difficulty	minor difficulty	serious difficulty	unable to do
9. Getting in or out of bed				
10. Preparing meals				
11. Eating				
12. Using the telephone				

13. If I do have difficulty with any of the above daily tasks, I am assisted by:
☐ spouse ☐ other relative ☐ friend ☐ agency or volunteer ☐ no one

TRANSPORTATION

14. I need, but do not have, transportation for: (CHECK ALL THAT APPLY)
☐ medical appointments ☐ social activities ☐ other (SPECIFY) _____
☐ grocery shopping ☐ assistance with special needs _____
☐ does not apply _____
15. I find public transportation:
☐ easy to use ☐ difficult to use ☐ not available in my area ☐ does not apply
16. I am interested in:
☐ mature driver classes ☐ learning to use public transportation ☐ peer driving program ☐ none of the above

L. A. County Seniors Count!

SOCIAL

17. I live alone:
☐ yes ☐ no
18. I am interested in the following activities: (CHECK ALL THAT APPLY)
☐ recreation ☐ educational ☐ employment / job training / placement
☐ physical exercise ☐ community involvement ☐ volunteering
☐ entertainment ☐ religious ☐ other (SPECIFY) _____
19. The following keeps me from doing the things I like in the community:
 (CHECK ALL THAT APPLY)
☐ no interest ☐ don't know about opportunities ☐ language barriers
☐ no time ☐ transportation problems ☐ don't match my interests
☐ not accessible ☐ cost ☐ not available
☐ other (SPECIFY) _____
20. The issue of isolation affects my quality of life.
- | no problem | minor problem | serious problem |
|------------|---------------|-----------------|
| | | |
21. Regarding employment:
- | Yes | No |
|-----|----|
| | |
| | |
| | |
| | |
| | |

IN-HOME SERVICES

22. I need help with: (CHECK ALL THAT APPLY)
☐ cooking ☐ yard work ☐ grocery shopping / benefits
☐ routine housework ☐ laundry ☐ none of the above
☐ minor home repairs ☐ other (SPECIFY) _____
23. I need help with: (CHECK ALL THAT APPLY)
☐ dressing / bathing ☐ bill paying / budgeting ☐ none of the above
☐ walking ☐ picking up medication ☐ other (SPECIFY) _____
☐ transfer from bed to wheelchair _____
24. I need help with:
☐ applying for in-home services (IHSS) ☐ appealing the denial of IHSS ☐ none of the above
25. Home-delivered meals:
☐ I receive them. ☐ I do not need them. ☐ I need them but do not receive them.
☐ I receive them but need help heating them.

L. A. County Seniors Count!

HOUSING

- | no problem | minor problem | serious problem |
|------------|---------------|-----------------|
| | | |
26. The cost of energy / utilities affects my quality of life.
27. I currently reside:
- | | | |
|--|---|---|
| <input type="checkbox"/> in a home that I own | <input type="checkbox"/> in assisted living | <input type="checkbox"/> in a mobile-home park |
| <input type="checkbox"/> in an apartment | <input type="checkbox"/> with a relative or friend | <input type="checkbox"/> in a board-and-care facility |
| <input type="checkbox"/> in a retirement community | <input type="checkbox"/> in a home with three or four other seniors | <input type="checkbox"/> other (SPECIFY) _____ |
28. I have problems with the following: (CHECK ALL THAT APPLY)
- | | | |
|--|--|---|
| <input type="checkbox"/> meeting mortgage / insurance / maintenance payments | <input type="checkbox"/> finding an affordable apartment | <input type="checkbox"/> sufficient lighting |
| <input type="checkbox"/> major homeowner repairs (plumbing / electrical) | <input type="checkbox"/> paying rent | <input type="checkbox"/> restrictions on visitors |
| <input type="checkbox"/> minor homeowner repairs (leaky faucets) | <input type="checkbox"/> restrictions on pets | <input type="checkbox"/> safety issues |
| <input type="checkbox"/> yard work | <input type="checkbox"/> landlord repairs | <input type="checkbox"/> none of the above |
| <input type="checkbox"/> meeting condominium fee payments | <input type="checkbox"/> other (SPECIFY) _____ | |
29. If I decided I could no longer remain in my current residence, I would choose the following places to live: (CHECK ALL THAT APPLY)
- | | | |
|--|---|---|
| <input type="checkbox"/> in a home that I own | <input type="checkbox"/> in assisted living | <input type="checkbox"/> in a mobile-home park |
| <input type="checkbox"/> in an apartment | <input type="checkbox"/> with a relative or friend | <input type="checkbox"/> in a board-and-care facility |
| <input type="checkbox"/> in a retirement community | <input type="checkbox"/> in a home with three or four other seniors | <input type="checkbox"/> other (SPECIFY) _____ |

LEGAL

30. I have concerns about: (CHECK ALL THAT APPLY)
- | | | |
|---|--|--|
| <input type="checkbox"/> need a will / trust | <input type="checkbox"/> financial debt | <input type="checkbox"/> financial responsibility for a relative |
| <input type="checkbox"/> Social Security benefits | <input type="checkbox"/> identity theft | <input type="checkbox"/> physical crime |
| <input type="checkbox"/> property crime | <input type="checkbox"/> Medi-Cal benefits | <input type="checkbox"/> other (SPECIFY) _____ |
31. I go to the following to receive assistance with the above issues: (CHECK ALL THAT APPLY)
- | | | |
|---|---|--|
| <input type="checkbox"/> legal aid | <input type="checkbox"/> senior center | <input type="checkbox"/> Social Security |
| <input type="checkbox"/> private attorney / paralegal | <input type="checkbox"/> Small Claims Court | <input type="checkbox"/> Medi-Cal |
| <input type="checkbox"/> Internet | <input type="checkbox"/> free seminars | <input type="checkbox"/> other (SPECIFY) _____ |

L. A. County Seniors Count!

HEALTH

32. I have: (CHECK ALL THAT APPLY)
☐ medical insurance ☐ dental insurance ☐ prescription drug insurance ☐ HMO
33. I have had: (CHECK ALL THAT APPLY)
☐ a dental exam in the last three years ☐ a flu shot in the last year ☐ a pneumonia shot in the last ten years ☐ a physical exam in the last three years
34. I would participate in an exercise program if available:
☐ yes ☐ no
35. In my present circumstances, although needed, I am unable to afford: (CHECK ALL THAT APPLY)
☐ medical care ☐ prescription drugs ☐ hearing care (hearing aids, implants)
☐ dental care ☐ vision care (glasses, cataract surgery) ☐ none of the above
☐ other _____
36. I have the following problems regarding prescription medications: (CHECK ALL THAT APPLY)
☐ paying for them ☐ understanding doctor's orders ☐ none of the above
☐ prescription refills ☐ taking pills on time ☐ other (SPECIFY) _____

PREVENTION

37. I would like information about: (CHECK ALL THAT APPLY)
☐ elder abuse intervention & prevention.
☐ health promotion and disease prevention activities (nutrition counseling, medication management)
☐ safety education & prevention (home safety, fall prevention, fire safety, crime stop)

CAREGIVER SERVICES

38. I am currently raising my grandchildren or children of other family members in my home:
☐ yes ☐ no
39. I provide unpaid care for a family member and need:
☐ relief ☐ support services ☐ financial services ☐ none of the above
40. I receive assistance with the raising of family members in my home:
☐ yes ☐ yes, but need more ☐ no

Your input is very important. Thank you for your participation.

**For information regarding aging programs and services, please call 800-510-2020.
For information about the survey, contact Cheryl at 213-738-2600.**

Rev. 8-30-06

Page 4 of 4

Appendix F

Weighted Tables

L.A. County Seniors Count! Survey of Adult and Aging Population

Weighted Frequencies for All Survey Questions

Question 2

Age	Percent of respondents	Number
60 to 74	65%	10,661
75 to 85	24%	3,987
85 and over	11%	1,844
Total	100%	16,492
Average age	73	

Question 3

I have lived in this community for	Percent of respondents	Number
less than 5 years	8%	1,376
5 to 9 years	8%	1,242
10 to 19 years	13%	2,102
20 to 39 years	32%	5,248
40 or more years	37%	6,150
no response	2%	373
Total	100%	16,491
Average length of residency: 32 years		

Question 4

My gender is	Percent of respondents	Number
female	56%	9,297
male	42%	6,974
no response	1%	220
Total	100%	16,491

Question 5

My marital status is	Percent of respondents	Number
now married	41%	6,750
separated	4%	628
never married	9%	1,437
widowed	27%	4,534
divorced	17%	2,822
other	1%	199
no response	1%	122
Total	100%	16,491

Question 6

My education level is	Percent of respondents	Number
0 to 8th grade	13%	2,181
9th to 12th grade	24%	4,005
some college	28%	4,647
college graduate	33%	5,405
no response	2%	254
Total	100%	16,491

Question 7

My income source(s) is (are):	Percent of respondents	Number
employment	14%	2,244
investments	25%	4,159
Social Security	70%	11,597
pension	38%	6,316
Supplemental Security Income (SSI) / Social Security Pension (SSP)	18%	2,925
no response	4%	615
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 8

My ethnic group is	Percent of respondents	Number
Hispanic/Latino	23%	3,741
Black/African American	9%	1,499
Asian/Pacific Islander	10%	1,569
White/Caucasian	54%	8,869
Native American/Alaskan Native	0%	52
Multi-ethnic	1%	121
Other	1%	226
no response	3%	414
Total	100%	16,491

Questions 9 to 12

	no difficulty	minor difficulty	serious difficulty	unable to do	no response		Total
Getting in or out of bed	70%	19%	5%	2%	4%	100%	16,488
Preparing meals	68%	15%	6%	6%	5%	100%	16,488
Eating	82%	10%	2%	1%	6%	100%	16,488
Using the telephone	79%	11%	3%	2%	6%	100%	16,488

Questions 9 to 12: Difficulties Overall

Daily activities difficulties	Percent of respondents	Number
No difficulties	62%	9,762
At least 1 difficulty	38%	5,964
Total	100%	15,726

Question 13

If I do have difficulty with any of the above daily tasks, I am assisted by	Percent of respondents	Number
spouse	17%	2,830
other relative	12%	1,976
friend	4%	681
agency or volunteer	6%	1,067
no one	28%	4,604
no response	32%	5,331
Total	100%	16,488

Question 14

I need, but do not have, transportation for:	Percent of respondents	Number
medical appointments	19%	3,122
social activities	12%	2,046
grocery shopping	15%	2,531
assistance with special needs	9%	1,408
does not apply	51%	8,360
other	5%	761
no response	22%	3,694
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 15

I find public transportation	Percent of respondents	Number
easy to use	23%	3,712
difficult to use	23%	3,744
not available in my area	5%	752
does not apply	43%	7,011
no response	8%	1,262
Total	100%	16,481

Question 16

I am interested in:	Percent of respondents	Number
mature driver classes	18%	2,932
learning to use public transportation	12%	2,030
peer driving program	5%	849
none of the above	60%	9,954
no response	10%	1,577
<i>Total may exceed 100% as respondents could select more than one option.</i>		



Question 17

I live alone	Percent of respondents	Number
yes	41%	6,741
no	56%	9,137
no response	3%	413
Total	100%	16,291

Question 18

I am interested in the following activities:	Percent of respondents	Number
recreation	47%	7,664
educational	36%	5,868
employment / job training / placement	10%	1,690
physical exercise	54%	8,853
community involvement	24%	3,941
volunteering	24%	3,987
entertainment	42%	6,896
religious	25%	4,120
other	6%	913
no response	13%	2,039
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 19

The following keeps me from doing the things I like in the community:	Percent of respondents	Number
no interest	9%	1,401
don't know about opportunities	22%	3,610
language barriers	10%	1,574
no time	15%	2,370
transportation problems	16%	2,600
don't match my interests	9%	1,474
not accessible	7%	1,100
cost	15%	2,420
not available	7%	1,202
other	8%	1,348
no response	27%	4,438
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 20

The issue of isolation affects my quality of life	Percent of respondents	Number
no problem	56%	9,162
minor problem	22%	3,588
serious problem	7%	1,148
no response	15%	2,393
Total	100%	16,291

Question 21

Regarding employment:	yes	no	no response	Total
I'd like to find a job	13%	48%	39%	100% 16,292
I'd like to work more hours	4%	47%	49%	100% 16,293
I'd like to work fewer hours	7%	42%	51%	100% 16,293
I'd like quit my job, but I need the money	6%	40%	53%	100% 16,293
I am not interested in working	32%	36%	32%	100% 16,293

Question 22

I need help with:	Percent of respondents	Number
cooking	16%	2,632
yard work	20%	3,312
grocery shopping / benefits	19%	3,102
routine housework	25%	4,125
laundry	17%	2,705
minor home repairs	25%	4,058
none of the above	46%	7,471
other	4%	571
no response	8%	1,361
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 23

I need help with:	Percent of respondents	Number
dressings / bathing	10%	1,675
bill paying / budgeting	13%	2,064
walking	13%	2,065
picking up medication	14%	2,332
transfer from bed to wheelchair	3%	466
none of the above	63%	10,314
other	3%	485
no response	10%	1,630
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 24

I need help with:	Percent of respondents	Number
applying for in-house services (IHSS)	10%	1,649
appealing the denial of IHSS	2%	379
none of the above	74%	12,076
no response	15%	2,380
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 25

Home delivered meals:	Percent of respondents	Number
I receive them	5%	874
I do not need them	71%	11,600
I need them but do not receive them	11%	1,810
I receive them but need help heating them	1%	146
no response	12%	1,961
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 26

The cost of energy / utilities affects my quality of life	Percent of respondents	Number
no problem	53%	8,534
minor problem	29%	4,710
serious problem	10%	1,621
no response	8%	1,269
Total	100%	16,134

Question 27

I currently reside:	Percent of respondents	Number
in a home that I own	53%	8,529
in an apartment	25%	4,015
in a retirement community	4%	693
in assisted living	1%	240
with a relative or friend	10%	1,544
in a home with three or four other seniors	1%	198
in a mobile-home park	3%	523
in a board-and-care facility	0%	52
other	4%	677
no response	2%	370
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 28

I have problems with the following:	Percent of respondents	Number
meeting mortgage / insurance / maintenance payments	7%	1,163
major homeowner repairs (plumbing / electrical)	17%	2,729
minor homeowner repairs (leaky faucets)	16%	2,511
yard work	14%	2,318
meeting condominium fee payments	2%	288
finding an affordable apartment	10%	1,660
paying rent	10%	1,607
restrictions on pets	3%	414
landlord repairs	3%	497
sufficient lighting	3%	455
restrictions on visitors	2%	311
safety issues	5%	758
none of the above	47%	7,641
other	2%	395
no response	8%	1,274
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 29

If I decided I could no longer remain in my current residence, I would choose the following places to live:	Percent of respondents	Number
in a home that I own	27%	4,284
in an apartment	16%	2,622
in a retirement community	30%	4,777
in assisted living	16%	2,619
with a relative or friend	15%	2,403
in a home with three or four other seniors	5%	735
in a mobile-home park	5%	789
in a board-and-care facility	4%	707
other	5%	840
no response	13%	2,090
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 30

I have concerns about:	Percent of respondents	Number
need a will / trust	20%	3,186
Social Security benefits	18%	2,972
property crime	12%	1,989
financial debt	12%	1,905
identity theft	25%	4,080
Medi-Cal benefits	16%	2,605
financial responsibility for a relative	6%	910
physical crime	12%	1,930
other	8%	1,302
no response	32%	5,232
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 31

I go to the following to receive assistance with the above issues:	Percent of respondents	Number
legal aid	6%	1,043
private attorney / paralegal	14%	2,243
Internet	12%	1,889
senior center	26%	4,201
Small Claims Court	2%	326
free seminars	15%	2,402
Social Security	17%	2,757
Medi-Cal	11%	1,785
other	10%	1,619
no response	35%	5,705
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 32

I have:	Percent of respondents	Number
medical insurance	70%	11,277
dental insurance	39%	6,252
prescription drug insurance	53%	8,472
HMO	37%	5,991
no response	10%	1,670
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 33

I have had:	Percent of respondents	Number
a dental exam in the last three years	69%	11,180
a flu shot in the last year	67%	10,835
a pneumonia shot in the last ten years	49%	7,831
a physical exam in the last three years	78%	12,643
no response	6%	997
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 34

I would participate in an exercise program if available	Percent of respondents	Number
yes	57%	9,178
no	28%	4,496
no response	15%	2,453
Total	100%	16,127

Question 35

In my present circumstances, although needed, I am unable to afford:	Percent of respondents	Number
medical care	9%	1,372
dental care	18%	2,881
prescription drugs	9%	1,505
vision care (glasses, cataract surgery)	13%	2,169
hearing care (hearing aids, implants)	11%	1,708
none of the above	55%	8,811
other	3%	465
no response	15%	2,394
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 36

I have the following problems regarding prescription medications:	Percent of respondents	Number
paying for them	14%	2,190
prescription refills	6%	1,042
understanding doctor's orders	5%	837
taking pills on time	8%	1,254
none of the above	62%	10,005
other	3%	441
no response	14%	2,201
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 37

I would like information about:	Percent of respondents	Number
elder abuse intervention and prevention	14%	2,290
health promotion and disease prevention activities (nutrition counseling, medication management)	33%	5,353
safety education and prevention (home safety, fall prevention, fire prevention, fire safety, crime stop)	35%	5,606
no response	49%	7,931
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 38

I am currently raising my grandchildren or children of other family members in my home	Percent of respondents	Number
yes	5%	874
no	84%	13,538
no response	10%	1,685
Total	100%	16,096

Question 39

I provide unpaid care for a family member and need:	Percent of respondents	Number
relief	2%	386
support services	4%	714
financial services	4%	618
none of the above	78%	12,618
no response	14%	2,193
<i>Total may exceed 100% as respondents could select more than one option.</i>		

Question 40

I receive assistance with the raising of family members in my home	Percent of respondents	Number
yes	2%	274
yes, but need more	1%	228
no	84%	13,459
no response	13%	2,135
Total	100%	16,096

Survey Language

Survey language	Percent of respondents	Number
English	84%	13,856
Armenian	1%	213
Chinese	2%	274
Japanese	0%	35
Korean	1%	204
Spanish	11%	1,786
Tagalog	1%	125
Total	100%	16,492



Appendix G

Bibliography

AARP. (2003). These Four Walls... Americans 45+ Talk About Home and Community.

AARP. (2004). Maximizing Your Workforce: Employees Over 50 in Today's Global Economy: Wharton, University of Pennsylvania; AARP Global Aging Program.

AARP. (2005). Beyond 50.05 Survey: AARP.

AARP. (2005). Reimagining America: How America Can Grow Older and Prosper (pp. 36): AARP.

AARP Public Policy Institute. (2007). Valuing the Invaluable.

AARP Research Group. (2000). Legal Documents Among the 50+ Population: Findings From an AARP Survey (pp. 14): AARP.

Adler et al. (2005). What do we mean by "Civic Engagement". *Journal of Transformative Education*.

Arno, P. S., National Family Caregiver Association, & Family Caregiver Alliance. (2006). Prevalence, hours and economic value of family caregiving, updated state-by-state analysis of 2004 national estimates.

Bailey, C. L. (2003). Designing a life of wellness: Evaluation of the demonstration program at the Wilder Humboldt campus. Saint Paul, MN: Wilder Research Center.

Bailey, L. (2004). Aging Americans: Stranded Without Options (pp. 20): Surface Transportation Policy Project.

Beverly et al. (2005). Needs Assessment of Rural Communities: A Focus on Older Adults. *Journal of Community Health*, 30(3), 197-212.

Bloom, D. E., & Canning, D. (2006, September). Booms, Busts and Echoes: How the biggest demographic upheaval in history is affecting global development. *Finance and Development*, 43, 15.

Brandl, B., & Cook-Daniels, L. (2002). Domestic Abuse Later In Life: A Research Review (pp. 68): National Clearinghouse on Abuse Later in Life, Wisconsin Coalition Against Domestic Violence, Natl Center on Elder Abuse.

Butler, C. (2007). Lifelong Learning Plays a Vital Role in Author's Bold Vision for a New Old Age. 2007

Butrica, B., & Uccello, C. (2004). How Will Boomers Fare at Retirement? (pp. 93): AARP.

Butricia, B., & Schaner, S. (2005). Satisfaction in Engagement and Retirement.

California Dept of Health Services Epidemiology and Prevention for Injury Control Branch. (2003). Californians with Activity Limitations: Data from the California Health Interview Survey 2001. *EPICgram*(7), 6.

Centers for Disease Control. (2004). The State of Aging and Health in America (pp. 48): Merck Institute of Aging and Health.

Centers for Disease Control. (2007). Healthy Aging: Preserving Function and Improving Quality of Life Among Older Americans (pp. 4): US Department of Health and Human Services.

Centers for Disease Control. (2007). The State of Aging and Health in America (pp. 46): Merck Company Foundation.

Centers for Disease Control, & National Center for Chronic Disease Prevention and Health Promotion. (2004). Physical Activity and Health: A Report from the Surgeon General—Older Adults.

Chapman et al. (2006). Dementia and its implications for public health. *Preventing Chronic Disease: Public Health Research, Practice and Policy*, 3(2), 13.

Cohen, S., & Lemay, E. P. (In Press). Why Would Social Networks be Linked to Affect and Health Practices? *Health Psychology*.

- Commission on Affordable Housing and Health Facility Needs for Seniors in the 21st Century. (2002). *The Quiet Crisis: A Report to Congress*.
- Congressional Budget Office. (2003). *Baby Boomers' Retirement Prospects: An Overview* (pp. 46): The Congress of the United States.
- Coughlin, J. (2001). Transportation and Older Persons: Perception and Preferences (pp. 30). Washington, DC: AARP.
- Covinsky et al. (2003). Loss of Independence in Activities of Daily Living in Older Adults Hospitalized with Medical Illnesses: Increased Vulnerability with Age. *Journal of American Geriatric Society*, 51, 451–458.
- Dominick et al. (2004). Health-related quality of life among older adults with arthritis. *Health and Quality of Life Outcomes*, 2(5), 8.
- Duffy, M. (Unknown). Psychological Services in Long Term Care Resource Guide (pp. 14): Counseling Psychology Program Texas A & M University.
- Elderhostel, I. (2007). Mental stimulation and lifelong learning activities in the 55+ population: Elderhostel, Inc.
- Evans, E., Ritter, A. S., & Straight, A. (2002). Understanding Senior Transportation: Report and Analysis of a Survey of Consumers Age 50+ (pp. 104): AARP.
- Findlay, R., & Cartwright, C. (2002). Social Isolation & Older People: A Literature Review.
- Fry, P. S. (2005). Protecting the Quality of Life of Older Adults. *Geriatric Times*, 11(4), 5.
- Gibson, M. J. (2003). Beyond 50.03: A Report to the Nation on Independent Living and Disability: Executive Summary. 2007, from <http://www.aarp.org/research/housing-mobility/assistedliving/aaresearch-import-753.html>
- Gill et al. (1997). The Role of Change in Physical Performance in Determining Risk for Dependence in ADLs Among Nondisabled Community-Living Elderly Persons. *Journal of Clinical Epidemiology*, 50(7), 765–772.
- Gill, T. M., Robison, J. T., & Tinetti, M. E. (1998). Difficulty and Dependence: Two Components of the Disability Continuum among Community-Living Older Persons. *Annals of Internal Medicine*, 128(2), 96–101.
- Gillick, M. R. (2006). *Denial of aging: perpetual youth, eternal life, and other dangerous fantasies*. Cambridge, MA: Harvard University Press.
- Harris, D. K. (2007). *Sociology of aging* (3rd ed.). Lanham, MD: Rowman & Littlefield.
- Hokenstad, A. (2005). More care at home: the challenge of creating viable community alternatives to nursing home care. *Care Management Journals*, 6(1), 9–14.
- Houser, A. (2005). Community Mobility Options: The Older Person's Interest (pp. 2): AARP.
- Houser, A. (2005). Older Drivers and Automobile Safety (pp. 2): AARP.
- Houser, A. (2007). Long-term care (pp. 2): AARP.
- HSBC Insurance Holdings Ltd. (2007). *Future of retirement: the new old age—global report*. London, England: HSBC Insurance Holdings, Ltd.
- HSBC Insurance Holdings Ltd. (2006). *Future of retirement in a world of rising life expectancies*. London, England: HSBC Insurance Holdings, Ltd.
- International City/Council Management Association. (2003). Active living for older adults: Management strategies for healthy and livable communities: International City/Council Management Association.
- Jenson et al. (2007). Community Assessment of Senior Health Using a Telephone Survey and Supplementary Methods. *Journal of Applied Gerontology*.
- Johnson, C., Myers, A., & Scholey, L. (2003). Outcome Evaluation of the Canadian Centre for Activity and Aging's Home Support Exercise Program for Frail Older Adults. *J Aging Phys Activity*, 11, 408–424.
- Johnson, K. (2006). Demographic Trends in Rural and Small Town America (pp. 40): Carsey Institute.
- Johnson, R. W. (2005). Many Older Americans Engage in Caregiving Activities. *Perspectives on Productive Aging*(3), 6.
- Johnson, R. W. (2006). Health Insurance Coverage and Costs at Older Ages: Evidence from the Health and Retirement Study (pp. 74): The Urban Institute.

- Johnson, R. W., Toohey, D., & Wiener, J. M. (2007). Meeting the Long-Term Care Needs of the Baby Boomers: How Changing Families Will Affect Paid Helpers and Institutions (pp. 61).
- Johnson, R. W., & Wiener, J. M. (2006). A profile of frail older Americans and their caregivers (pp. 78): Urban Institute.
- Kane, R. L., & West, J. C. (2005). *It shouldn't be this way: the failure of long-term care* (1st ed.). Nashville, TN: Vanderbilt University Press.
- Karoly, L. A., & Zissimopoulos, J. (2004). Self Employment and the 50+ Population (pp. 138): AARP.
- Kersting, K. (2004). Improving the end of life for older adults. *PsychNET*, 3.
- King, W. (2003). The Relationship Between Convenience of Destinations and Walking Levels in Older Women. *American Journal of Health Promotion*, 18(1), 74–82.
- Kochera, A. (2006). *State housing profiles: a special analysis of the Census Bureau's American Community Survey*. Washington, DC: AARP, Public Policy Institute.
- Kochera, A., & Bright, K. (2006). Livable communities for older people. *Generations*.
- Koffman, D., Raphael, D., & Weiner, R. (2004). The Impact of Federal Programs on Transportation for Older Adults (pp. 59): AARP.
- Kutner, G. (2005). Summary of 2005 AARP Driver Safety Program Graduate Study (pp. 13): AARP.
- Lawton, M. P., & Brody, E. M. (1969). Assessment of older people: Self-maintaining and instrumental activities of daily living, *Gerontologist* (Vol. 9, pp. 179–186).
- Lichtenstein, J. H., & Verma, S. (2003). Older Workers' Pension Plans and IRA Coverage (pp. 4): Public Policy Institute.
- Manheimer, R. J. (2002). Older Adult Education in the United States: Trends and Predictions (pp. 9). Asheville, NC: North Carolina Center for Creative Retirement, University of North Carolina at Asheville.
- Manteghi, L. (2005). International Retirement Security Survey (pp. 27): AARP.
- McKune, S. L., Andresen, E. M., Zhang, J., & Neugaard, B. (2005). Caregiving: A national profile and assessment of caregiver services and needs (pp. 50): Rosalynn Carter Institute, University of Florida,.
- Mermin, G., Johnson, R., & Murphy, D. (2007). How Long Do Baby Boomers Plan to Work? *Older Americans' Economic Security*(12), 2.
- Millar, W. W. Mobility Options that Will Enable Freedom, Opportunity and Independence for Older Adults: A Vision of our Transportation Future (pp. 5): American Public Transportation Association.
- Moore. (2007). Civic Engagement, Older Adults and Inclusion: American Society on Aging.
- Murphy, D., Johnson, R., & Mermin, G. (2007). Older Americans' Economic Security. *The Retirement Project*(13), 2.
- NAHB Research Center. (2005). The National Older Adult Housing Survey.
- Namkee et al. (2007). Formal and informal volunteer activity and spousal caregiving among older adults. *Research on Aging*.
- National Center for Injury Prevention and Control, & Center for Disease Control. (2006). A Tool Kit to Prevent Senior Falls.
- National Center on Elder Abuse. (2005). Elder Abuse Prevalence and Incidence (pp. 2): National Center on Elder Abuse.
- National Family Caregivers Association. (2004). Estimated Prevalence and Economic Value of Family Caregiving, by State.
- National Institute on Aging. (2006). Dramatic Changes in U.S. Aging Highlighted in New Census, NIH Report: Impact of Baby Boomers Anticipated: National Institute on Aging.
- National Institute on Aging. (Unknown). Growing Older in America: National Institute on Aging.
- National Institute on Aging. (Unknown). The Health & Retirement Study: Growing Older in America: National Institute on Aging.
- O'Neill, B. (Unknown). Financial Fitness for the Best Rest of Your Life: What Older Adults Need to Know About Money (pp. 20).

- Ory, M., Hoffman, M., Hawkins, Sanner, B., & Mockenhaupt, R. (2003). Challenging aging stereotypes: Strategies for creating a more active society. *American Journal of Preventive Medicine*, 24(3Sii), 164–171.
- Pandya, S. M. (2005). Racial and Ethnic Differences Among Older Adults in Long-term Care Use (pp. 2): AARP.
- Parker, M. G., & Thorslund, M. (2007). Health trends in the elderly population: getting better and getting worse. *Gerontologist*, 47(2), 150–158.
- Partnership for Prevention. Creating Communities for Active Aging a Guide to Developing a Strategic Plan to Increase Walking and Biking by Older Adults in Your Community.
- Perrin, T. (2007). Perspectives of Employers, Workers and Policymakers in the G7 Countries on the New Demographic Realities (pp. 124): AARP.
- Pynoos, J., Rose, D., Rubenstein, L., Choi, I. H., & Sabata, D. (2006). Evidence-based interventions in fall prevention. In S. M. Enguidanos (Ed.), *Evidence-based Interventions for Community Dwelling Older Adults* (pp. 55-73).
- Rix, S. E. (2004). Aging and Work—A View From the United States (pp. 63): AARP.
- Roper ASW. (2002). Staying Ahead of the Curve: The AARP Work and Career Study (pp. 197): AARP.
- Roper ASW. (2004). Baby Boomers Envision Retirement II (pp. 136): AARP.
- Schulz, J. H., & Binstock, R. H. (2006). *Aging nation: the economics and politics of growing older in America*. Westport, CT: Praeger Publishers.
- Springer et al. (2005). The Relation Between Brain Activity During Memory Tasks and Years of Education in Young and Older Adults. *Neuropsychology*, 19(2), 181–192.
- The Joint Center for Housing Studies. (2005). The State of the Nation's Housing: Demographic Trends in the Housing Market: Harvard University.
- The National Alliance for Caregiving, & AARP. (2004). Caregiving in the US: AARP.
- The National Council on the Aging. Partnering to Promote Healthy Aging: Creative Best Practice Community Partnerships (pp. 53): Center for Health Aging.
- The National Council on the Aging. (2000). American Perceptions of Aging in the 21st Century (pp. 16): AARP.
- The Urban Institute. (2006). Work and Retirement: Facts and Figures (pp. 4): The Urban Institute.
- The Urban Institute. (2007). Report Projects Future Need for Long-Term Care, Effects on Family and Public Policy (pp. 3): The Urban Institute.
- Turner, A. (Unknown). Pension Challenges in an Aging World. Retrieved December 4, 2007
- U.S. Census Bureau. (2006). Voting and Registration in the Election of November 2004.
- U.S. Department of Commerce, & U.S. Department of Health and Human Services. (2005). 65+ in the United States: 2005.
- Unknown. (2001). *National Blueprint: Increasing Physical Activity Among Adults Age 50 and Older*. Princeton, NJ: The Robert Wood Johnson Foundation.
- Unknown. (2005). Health Assessment. 2007, from http://www.healthinaging.org/AGINGINTHEKNOW/chapters_ch_trial.asp?ch=8
- US Administration on Aging. (2005). Celebrate Long-term Living (pp. 68).
- US Department of Labor. (2007). Volunteering in the United States, 2006.
- Vitt et al. (2005). Goodbye to Complacency: Financial Literacy Education in the U.S. 2000-2005 (pp. 142): AARP.
- Wallace, M., & Shelkey, M. (2007). Katz Index of Independence in Activities of Daily Living (ADL). *try this: Best Practices in Nursing Care to Older Adults*(2), 2.
- Walters, N., & Jackson, A. M. (2003). Identity Theft: Experience of Older Complaints (pp. 4): AARP.



Los Angeles County
Community and Senior Services
3175 W. Sixth Street
Los Angeles, CA 90020
(213) 738-2600

www.ladcass.org



City of Los Angeles
Department of Aging
3580 Wilshire Blvd., Suite 300
Los Angeles, CA 90010
(213) 252-4030

www.lacity.org/DOA